

BOARD OF SUPERVISORS

Brown County



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HUMAN SERVICES COMMITTEE

Patrick Evans, Chair
Dan Robinson, Vice Chair
Erik Hoyer, Dan Haefs, Pat La Violette

HUMAN SERVICES COMMITTEE
Wednesday, November 18, 2015
5:30 p.m.
Room 200, Northern Building
305 E. Walnut Street, Green Bay

NOTICE IS HEREBY GIVEN THAT THE COMMITTEE MAY TAKE ACTION ON ANY ITEM LISTED ON THE AGENDA

- I. Call Meeting to Order.
- II. Approve/Modify Agenda.
- III. Approve/Modify Minutes of October 20, 2015.

Comments from the Public

Report from Human Services Chair, Patrick Evans

1. **Review Minutes of:**
 - a. Aging & Disability Resource Center Board of Director's (September 24, 2015).
 - b. Board of Health (August 25, 2015).
 - c. Community Options Program Planning Committee (October 26, 2015).
 - d. Mental Health Treatment Committee (September 24, 2015 and October 15, 2015).
 - e. Veterans' Recognition Subcommittee (October 20, 2015).

Human Services Department

2. Executive Director's Report.
3. Review and Approval of Brown County Lease Agreement for Our Place Facility.
4. Financial Report for Community Treatment Center and Community Programs.
5. Statistical Reports.
 - a. CTC Staff – Double Shifts Worked.
 - b. Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Hospital.
 - c. Monthly Inpatient Data – Bellin Psychiatric Center.
 - d. Child Protection – Child Abuse/Neglect Report.
 - e. Monthly Contract Update.
6. Request for New Non-Continuous Vendor.
7. Request for New Vendor Contract.

Other

8. Such other Matters as Authorized by Law.
9. Audit of bills.

Patrick Evans, Chair

Notice is hereby given that action by Committee may be taken on any of the items which are described or listed in this agenda. Please take notice that it is possible additional members of the Board of Supervisors may attend this meeting, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular & budget meeting of the **Brown County Human Services Committee** was held on Tuesday, October 20, 2015 at ASPIRO, 1673 Dousman Street, Green Bay, Wisconsin.

Present: Chair Evans, Supervisor Hoyer, Supervisor Haefs, Supervisor Robinson
Excused: Supervisor La Violette
Also Present: Erik Pritzl (Director of Human Services), Eric Johnson (Finance Mngr.), Jerry Polus (Veteran Service Officer), Devon Christianson (Aging & Disability Resource Center Director), Chua Xiong (Health Director). Supervisors Zima, Clancy, Jamir, Lund, Sieber, Landwehr, Gruszynski. Executive Streckenbach, Chad Weininger (Director of Administration), Dan Process (Internal Auditor), David Ehlinger (Finance Director), Sandy Parmer (Senior Accountant), Christina Connell (Senior HR Analyst), news media and other interested parties.

I. Call Meeting to Order.

The meeting was called to order by Chairman Evans at 5:34 p.m.

II. Approve/Modify Agenda.

Motion made by Supervisor La Violette, seconded by Supervisor Robinson to change the order of the agenda to move the budget portion to the beginning with the regular to follow. Vote taken. MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of September 23, 2015.

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve the minutes. Vote taken. MOTION CARRIED UNANIMOUSLY

Comments from the Public

Koren Bandoch –Golden House, Communications and Development Coordinator

Good Evening,

Our Executive Director, Karen, apologies that she could not be here tonight, but she is celebrating the journeys of local survivors at our Survivor Dinner tonight, celebrating Domestic Violence Awareness Month.

In her place, I would like to thank you for your past and present support of victim services in our community. It is only with your help and the support of our community that Golden House is here to provide safety and support to victims of domestic abuse.

Last year, Golden House received more than 6,500 calls from victims, concerned family members, and worried friends to our 24-hr helpline. Nearly 1,300 people found comfort through our shelter and outreach services, including 274 children and 79 men.

As we work to support current victims and survivors on their journey to healing, Golden House also works with the future generation to break the cycle of violence. Our team reached over 16,000 children and teens in local schools last year, talking about what healthy relationships look like and how to gain the self-esteem needed to expect respect in all their relationships.

If you would like to know any more about Golden House and the services we offer, I invite you to visit our website or stop by our University Ave site.

Thank you!

Cheryl Weber – JOSHUA

Weber thanked the committee for listening to them at meetings and individually. They were there to support the Mental Health Treatment Ad Hoc subcommittee's recommendation for funding for mental health and detox centers. The subcommittee was determined as well as JOSHUA to see needs and gaps get filled and get programs that better addressed the mentally ill and AODA programs they faced.

Tana Koss, Crisis Center & GB Officer

Koss thanked the committee for the opportunity to speak and stated she was present to represent a group that had been locally meeting since 2013, seeking solutions to a gap that was created when accessible detox went away in 2012. Their group was made up of local law enforcement, local hospitals, the Human Services Department, AODA, mental health providers, local homeless shelters, the Crisis Center and Family Services. They were asking the board to allocate resources in 2016 to help support detox services and to continue to support the expansion of CCS services to help address the gaps that current existed in the system with care for community members that were just getting started on their paths of recovery. The need for detox services was definitely there. A quick conversation with anyone from law enforcement, a local emergency room or the Crisis Center would help tell that story any night or day for that matter. The facilities and beds met the existing need they believed were here in Brown County. It really came down to an issue of funding and their group believed that allocating \$300,000 on resources to support detox would make a significant impact on the existing need. Representing local hospitals Koss informed that they supported allocating funds for detoxification services in the 2016 county budget. There had been a gap in the services for several years especially for those patients who had no financial resources to support their care. They had been a part of community groups seeking solutions for several years; the proposed budget dollars could be useable for directly providing services and contract for services to meet these needs. Green Bay hospitals Emergency departments routinely see patients who had no place to go for treatment once medically stabilized. As a hospital they will continue to look for ways to assist the county in being successful in treating this population.

Officer Van Handel informed, to keep it in perspective, he quoted, "*Wisconsin Statutes 51.45 – Prevention and control of alcoholism: (1) DECLARATION OF POLICY. It is the policy of this state that alcoholics and intoxicated persons may not be subjected to criminal prosecution because of their consumption of alcohol beverages but rather should be afforded a continuum of treatment in order that they may lead normal lives as productive members of society.*" From a law enforcement perspective they could talk all day about where detoxification fit on a continuum of treatment or continuum of care model but he felt that everyone would agree that detoxification services was a critical need and it was currently an unmet need in Brown County.

Representing the Crisis Center, Koss stated that on any given calendar day they had two to three and in sometimes an upwards of eight people in their lobby who were just bordering on the line of withdrawal symptoms and having no medical staff on hand and having their resources not meet their demands has really set their program and the individuals they were serving up for a high risk situation. With a viable detox option they truly believed that they could divert even more than the current 85% people they divert from unnecessary acute inpatient psychiatric treatment. Desperate family members call the Crisis Center regularly. They were overjoyed when their loved ones finally admitted that they had a problem and needed help and they were willing to get it today. So when Crisis Center got the call it was, "where do we go, where do we start?" Koss pleaded, help them have an answer locally by supporting detox services.

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Mike Duschene, ASPIRO President & Steve McCarthy, Curative Connections

McCarthy thanked the committee on behalf of the staff and board for their work to support people with human services needs in Brown County. Last year Duschene, McCarthy and Jon Syndergaard, Director of the CP Center came before this group to ask for support for a rate increase across the board for them, they did that and it was making a significant difference for people with disabilities as well as older adults and their families. He thanked the committee for that support on their behalf as well.

Duschene welcomed the committee to ASPIRO. He informed that Syndergaard extended his gratitude as he had a prior commitment. Duschene thanked the committee for being the "choir" that they had been preaching to for years for adults with disabilities. He had said time and time again that they couldn't do the work that they did without their support. They were going to Family Care with adults with disabilities but they looked forward to a continued relationship with Brown County when it came to children services.

Although shown in proper format, the committee moved to Item 9 at this time.

1. **Review Minutes of:**
 - a. **Aging & Disability Resource Center Board of Directors (August 27, 2015).**
 - b. **Human Services Board (September 10 & October 8, 2015).**
 - c. **Veterans' Recognition Subcommittee (August 18 & September 15, 2015).**
 - d. **Ad Hoc Mental Health Treatment Committee (September 24, 2015).**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to suspend the rules to take Items 1a-d. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve Items 1a-d. Vote taken. **MOTION CARRIED UNANIMOUSLY**

Communications – None

Human Services Department

2. **Resolution re: Helping families move from homelessness to self-sufficiency. *Standing Item until such time that there is action to be taken.***

Supervisor Robinson asked that Item 2 be removed from the agenda.

3. **Budget Adjustment Request (15-57): Any increase in expenses with an offsetting increase in revenue.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve. Vote taken. **MOTION CARRIED UNANIMOUSLY**

4. **Executive Director's Report.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to receive and place on file. Vote taken. **MOTION CARRIED UNANIMOUSLY**

5. **Resolution Authorizing Human Services to Request Waiver for Increased Service Provider Audit Threshold.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve. Vote taken. **MOTION CARRIED UNANIMOUSLY**

6. **Financial Report for Community Treatment Center and Community Programs.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

7. **Statistical Reports.**

- a. **CTC Staff – Double Shifts Worked.**
- b. **Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Hospital.**
- c. **Monthly Inpatient Data – Bellin Psychiatric Center.**
- d. **Child Protection – Child Abuse/Neglect Report.**
- e. **Monthly Contract Update.**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to suspend the rules to take Items 7a-e. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to receive and place on file Items 7a-e. Vote taken. MOTION CARRIED UNANIMOUSLY

8. **Request for New Non-Continuous Vendor.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

Other

9. **Teen Parent Third Quarter Outcome Report, Catholic Charities – Informational.**

Evans thanked them for the report and the work they did and questioned of the participants, did they help them file paternity. Tara De Grave, Child & Family Services Manager at Catholic Charities of the Diocese of Green Bay informed that nearly 100% of the clients that they worked with received BadgerCare and were mandated to participate in child support unless they could file a Good Cause. They currently they had three or four clients that had an approved Good Cause claim. Otherwise yes, they were supported in establishing paternity.

Robinson thanked De Grave for the report and the work they were doing. He questioned how many total clients they worked with that would be represented in the report. De Grave informed that the report was from July to September and it was 36 clients.

At this time Robinson asked questions in regard to fathers in the Teen Parent Program. De Grave was unable to provide the exact numbers but forwarded the info via email the following day. The numbers are as follows:

- *Seven fathers have had an open file with the Teen Parent Program during the past year.*
- *In addition, 34 fathers had participated in appointments that the mothers of their children have had with workers. That accounted for 48% of fathers that have participated in appointments with the mothers during the past year.*

They will be adding these statistics to their quarterly reports beginning with fourth quarter, 2015. They will also add information about the number of cases where paternity had been established and, if not, noting that workers had assisted mothers with connecting with child support to establish paternity.

De Grave added that they had referral connections with the fathering programs at Family Services.

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Motion made by Supervisor Robinson, seconded by Supervisor La Violette to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

9a. Ad Hoc Mental Health Treatment Committee Report.

Supervisor Zima informed that this was a joint effort of Sheriff Gossage, the Jail Administrator Phil Steffen, Judge Zuidmulder representing the judges, District Attorney David Lasee, Human Services Director Erik Pritzl, Behavioral Health Manager Ian Agar, Director of Administration Chad Weininger represented the County Executive, and Supervisors Hoyer and Zima represented the County Board, JOSHUA was also in attendance; quite a composite group, a lot of power in one place at the same time. He informed that their committee was working diligently and rapidly and they wanted to see something get started. The folks on the committee were really composited of a lot of aspects of their entire county budget. The jail was 95% filled, about 1/3 of people in there had mental health issues. He knew that they couldn't take them all out but the efforts of the committee would stop the flow of people to jail and it would start the decline or at least be more stable than it was right now. There was a big ax hanging over their head in the near future, a \$30 million dollar two pod operation. They were talking about it to get things started and make a dent in the problem. They were wasting resources at the jail and also not getting any help to fix the problem.

Service:	Description:	Amount:
Transitional Residential Treatment	Changes to the certification and regulation at the Community Treatment Center would allow us to offer services to populations with substance use needs. The service provides substance abuse treatment, immediate access to peer support through the environment and case management in the areas of personal health and hygiene, community socialization, job readiness, problem resolution counseling, housekeeping and financial planning.	\$300,000
Mobile Crisis Capacity Increase	Increased staffing to provide more onsite, in-person interventions for individuals experiencing a mental health crisis.	\$200,000
Detoxification Services	Funding for medically managed inpatient detoxification services in a hospital setting.	\$300,000
Day Report Center	Create a Day Report Center to serve as an alternative to incarceration for non-violent adult offenders. This would include monitoring, behavioral health screening and counseling, vocational coaching and employment support.	\$350,000
Total:		\$1,150,000

Referring to a handout (the above table) Zima presented four initiatives they'd like started. Transitional Residential Treatment meant that they had space in Brown County's existing mental health center that wasn't being utilized but they needed to make some changes in certification and regulations to accommodate more people. Pritzl added that in talking about detox services, as they worked through the issue, they could go through the detox process and fund the services but the question of what to do next was the problem. This particular piece got to that next step of where people went after they went through the detox process.

Zima informed that at one of their meetings Judge Zuidmulder talked about the mental health court he oversaw. The nine people that were in it were causing 30-40 stops by the Sheriff's Department, since participating in the program that had gone down to zero. That was a dramatic change.

Speaking to the other initiatives, Pritzl stated that the Mobile Crisis Capacity Increase was to increase staff to provide onsite interventions for people experiencing a mental health crisis whether it was at home, in a hospital or police station, etc. After listening to the people speak about detox, he didn't think they could argue that it was a need. Zima informed that Waukesha and Outagamie County had programs like the Day Report Center and they functioned and worked. People had to report daily to their whereabouts and what they were in doing in the last 24 hours. If they're left alone they could fall back on their same habits. This was a very inexpensive way to have a follow-up system so people didn't fall off the wagon.

In looking at the total projected costs of \$1,150,000, the tax rate change by adding this was 6.2 cents per thousand. It was \$6.20 on a \$100,000 house. This was a modest proposal, a bare minimum to start showing that they wanted to deal with the problems. If they didn't, they get closer to building the jail. He didn't separate those two things at all. Since the last census, in 10 years, the population grew 22,000 in Brown County while budgets stayed flat or down year after year. The total tax rate was \$4.47, which included the recommendations that were included today for everything the county did.

Supervisor Robinson thanked the committee for working on this, and the Basic Needs Committee group for the work they had done on these issues. These were real problems that needed to be addressed. Robinson questioned where the detoxification services would be located at the CTC? Pritzl responded that it would be separate from the transitional residential and in a hospital setting. The transitional residential would be using the existing community based residential facility (CBRF) beds. They were trying to see how they could use the 15 beds in the CBRF better as they were not fully utilized now. If they could do some things with regulations, open up to some different populations they could serve, then they could get people these services at their facility. They needed to check into if there were any physical changes that needed to be made. This was really the staffing aspect to get the people in place to meet regulations.

Robinson questioned if it was anticipated that they would be splitting the unit in some form, to keep a smaller CBRF going as well, besides the transitional residential treatment beds?

Pritzl responded that the great foresight of people in terms of regulation and what they had done already, was as a community based residential facility that actually was this type of facility, a transitional residential could be a CBRF, so they didn't need to change the physical setting of that piece of the regulation. They needed to understand if they could mix the populations and that's what they didn't understand yet and needed the Department of Health Services to advise them in that. They didn't need to change the regulation but they needed to change the programming.

Zima informed that they contracted for detox and they needed to determine what that cost was going to be. Next year there would be another hospital, which would provide competition and might have a little lower cost, but by and large their contract services had been a large savings to the county. They wanted to at least start with that. If it became too costly, then they evaluate whether they wanted to make a capital expenditure and build a space or not.

Robinson was just looking for clarification on if they meant a different hospital or the county's psychiatric hospital. Zima responded that Bellin had an excess capacity of about 65 beds. They're average daily count was about 25 and had space available and he felt they could work out a reasonable arrangement with them.

In regard to the mobile crisis capacity, Robinson informed that as part of his bosses training as a psychologist, he had to go out with law enforcement on calls where there was a crisis mental health issue involved, he questioned if that was included in the kind of things they were talking about with this? Pritzl responded that whether it was happening at the same time as law enforcement or not he didn't know if they were quite there yet. To get the crisis workers offsite and into the community more was what they would be trying to do.

Robison questioned if they had a location in mind for the Day Report Center. Pritzl answered that they did not at this time. The conversation started with DA Lasee when he mentioned that this had been effective in other communities. Pritzl felt it was a great model to look at. They were nowhere near the discussion of location.

Evans informed that Family Services President & CEO Jeff Vande Leest was present. He questioned if they ran a program like this in Valley? Vande Leest responded that they ran a Day Report Center in conjunction with Outagamie, serving as an alternative to incarceration for non-violent adult offenders. They had operated that since 2004. A very similar model to what Pritzl was describing. It had been a very effective program and diverted about 20 beds a day at the county jail. Evan stated they would be interested in doing something in Brown County, Vande Leest responded they would.

CTC Hospital & Nursing Home Administrator Luke Shubert was present to answer any questions regarding regulations.

La Violette thanked Supervisor Zima for his leadership on this issue and putting together a most impressive stellar committee to work on this, a terrible community problem. They put together a plan in her estimation was based on good common sense and was fiscally responsible. They needed to address this today and it wasn't going to go away by waiting. They all recognized that it was serious and had no problem supporting what they had done.

Hoyer stated that this took Supervisors Haefs idea of finding needs and brought so many different people together in a very effective way.

Sieber questioned if they knew the number of additional staff required. Pritzl responded that they didn't have a specific number of staff as they needed to make sure they had the regulations understood. It would require at least a substance abuse counselor and personal care or nursing assistants for that unit. The state needed to guide the process in terms of what they needed. The transitional residence piece would be Brown County staff at the CTC; the others would likely be contracted because they knew they had contract providers that provided the service. To be clear, mobile crisis did exist but not at the level they needed, the other three were an expansion or new and didn't exist. Detox could exist for people that had a funding source potentially but they currently didn't give it the attention it needed. Responding to Sieber, Pritzl stated that they had adequate staff to work with in terms of implementing, they were experienced in working in partnership with community providers, they had a Behavioral Health Manager and Director of Community Programs that would work with this. This was the world they worked in everyday and these

were the populations they served and tried to figure out how to serve every day. If they were given a tool that they could work with, he felt they would make it happen. Together with their Contract Administrator, their managers, supervisors, they would get it done. Based on the discussion at the committee, it would be a couple of months before they had a plan fully assembled. Zima stated they were going to move as fast as they could. They wanted the money in place to use if they could, if they don't use it all, they could carry it over because they didn't know when exactly everything was going to be set into place.

Supervisor Lund questioned if they could have it up and running by the second quarter of next year? Zima would like it before that. Pritzl felt they could in pieces for that timeframe. For the whole package, he felt a lot of things had to happen there. The Day Report Center may take a little longer because they were dealing with sites, contracts and regulations. He felt the transitional residential treatment, mobile crisis and detox were relatively fast to implement because they needed answers on regulations and staffing up for what they needed. It took time to train people.

As Chairman of Human Services, Evans thanked Supervisors Zima, Haefs, Hoyer and Erickson as well as the rest of the people that had worked on this. He was confident that the transitional residential treatment center will come together quickly, they had the providers and the law enforcement for the mobile crisis capacity and they did lots of work with Family Services to possibly partner with the detoxification services. As Chairman he did a lot of research in the Human Services area and the two issues that kept coming up were mental health and detoxification. The public might not see this as a whole but in Brown County, this was a real problem. The issue that they always had was that they couldn't put a price tag on prevention and this was so much of a proactive rather than a reactive program that had been developed by this Ad Hoc taskforce, it was quite impressive. The money could be put into the budget and it will save dollars in the future as well as lives, which was the most important thing.

Haefs asked that the committee take an individual roll call so that they verbally announced what their intentions were. In looking forward to the County Board meeting, this was all fine but it had to pass. His own impression was that they had to pass a budget by a simple majority. He had a feeling that this had a real chance to do that. He was a bit leery that it would pass by a veto-proof majority. They all knew what had happened in the past when it came to political goals of maintaining a levy. The budget as presented to him was very reasonable but it wasn't a penny below raising property taxes out of coincidence. There was a target goal. So now they were adding and they were going to increase taxes. He had a feeling that this was going to be subject to a veto. If they pass by a simple majority and it gets vetoed, and the veto was not overruled, then he wanted to go back and be able to vote "no" on the budget. He wanted a budget with this in it or he didn't want to vote for the budget. If it failed by a simple majority, then he wasn't voting for the budget. If it was vetoed and it failed to be in there, then he wanted to reconsider the budget as amended where this would not be included so he could vote, "no". Vice-Chairman Lund stated he would ask Corporation Counsel. This was one of the times where it was more to being a County Board Supervisor than worrying about a driveway at the golf course. This basically defined who they were, were they going to stand up for what was important to the community and for the citizens of this county. Obviously spend their money wisely but if there has to be a minor tax increase, he was willing to do that. If they commit to it here, they commit to it all the way through down to the County Board. Zima stated his points were well taken. They reduced the tax rate by 11 cents. This was coming back only about half of what was cut.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to appropriate \$1,150,000 for the Transitional Residential Treatment service for \$300,000, the Mobile Crisis for \$200,000, and the

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Detoxification Services for \$300,000 and the Day Report Center for \$350,000 to the Special Revenue Fund.
Roll Call Taken: La Violette-aye, Robinson-aye, Evans-aye, Hoyer-aye, Haefs-aye. MOTION CARRIED UNANIMOUSLY

BUDGET REVIEW

REVIEW OF 2016 DEPARTMENT BUDGETS

Comments from the Public – Budgetary Items

Veterans' Services

10. Review of 2016 Department Budget.

Veterans Service Officer Jerry Polus stated that he was comfortable with the budget; it was a fair budget and asked for support. He informed that there was one item that came up late last week in which he spoke to Evans about. The Disabled American Veterans (DAV) had applied for a federal grant program to purchase a van for transporting wheelchair bound veterans in Brown County to VA, private and personal appointments. Right now those veterans would have to use Medi-Van services. They had gone through the three step process and had received approval for their grant application. Next year they will see the federal funding flow down through the state to the county to the Green Bay Transit Authority. It was approximately \$36,000 and they had a cost-share. 80% Federal Grant with a 20% (\$7,200) cost-share.

Robinson stated he was in support but questioned if it had to come out of next year's budget? \$7,200 was not a lot of money and questioned if they could find money now and roll it over. Weininger felt there was potential if that was the will of the committee. He informed that they would have to come back and do a separate resolution. La Violette questioned if that was the easiest way to add money to next year's budget. Weininger responded that it was an easy way to do it for this year's budget; however, he thought that the vehicle didn't need to be purchased until next year. Polus informed that they wouldn't be receiving the van until the summer or fall of next year, 2016. Weininger informed that that's the reason they recommended doing it this way as opposed to using carryover funds. In that case they wouldn't have to do a resolution. Robinson informed he was fine with including it in the budget.

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to approve the Veterans' Services budget with the increase to the general property taxes by \$7,200 and increase Support Services by \$7,200. Roll Call Taken: Ayes - La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Aging & Disability Resource Center

11. Review of 2016 Department Budget.

Evans informed that their budget was approved by their board. ADRC Director Devon Christianson thanked the County Board, the Human Services Committee and Executive Streckenbach for the incredible support that they receive. They wouldn't be who they are without the combination of great staff, fundraising, federal and state grants and their relationship with the county, it was incredibly important and their support meant everything to them. Christianson referred to their initiatives on pg. 107 & 108: Modernization of Nutrition Programs, Dementia Friendly Community, Healthy Living and Diabetes Accreditation, Alzheimer's Family Caregiver Support Program (AFCSP) and Transportation Collaborative Study.

She loved the conversation tonight about prevention and how the pendulum needed to swing and the direction of let's not wait for a crisis. Their agency was all about getting people and reaching them as soon as they possibly could and supporting their caregivers who support families in their homes. Everything they did was about keeping people well and independent in their homes.

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Robinson thanked Christianson and her staff for the work they did and for the role she was playing in the community right now. Christianson served on the Bay Area Community Counsel and co-chaired a recent taskforce that put together an updated report on poverty in the community. It was a great voice to come out in the community to advocate for people in poverty. He wanted to also thank the directors in various departments for what they were doing in the community as well as the staff in Human Services for the work that they did, not only in their job description but going beyond that so often. He felt it didn't get acknowledged enough.

He gave kudos on the Transportation Collaborative Study in the rural areas. He technically didn't represent a rural area but knew a lot of people that lived in those areas and it was a great thing they were doing with Planning.

He also gave kudos for their Fund Balance policy. Having a Fund Balance policy for all Fund Balances in the county would be a wonderful thing and he was hoping more departments will follow. Following questions with regard to the Fund Balance item for ADRC, Weininger informed that they were making substantial changes to the budget books and will be working with supervisors to make sure that numbers were more transparent and more easily understandable to the average taxpayer.

Evans thanked Christianson for the work that they did.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to approve the Aging & Disability Resource Center budget. Roll Call Taken: Ayes - La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Health Department

12. Review of 2016 Department Budget.

Health Department Director Chua Xiong briefly spoke to the New Initiatives on page 114.

In 2016, she will be working on a new initiative with Aging Disability and Resource Center to expand partnership in addressing the needs of our population.

Xiong informed that coming in as the new Director, she was looking at standing services and efficient ways of working with other county departments to share resources, to make sure they were fiscally responsible with programs and services that they provided. As far as regionalization the state looked at Brown County as an expert or leaders in the area and they received increased grant funding for the Wisconsin Wellness Program to take on regionalization as well as the Wisconsin Hospital Emergency Preparedness Program. They were also asked to provide consultation for Manitowoc County and they were provided a grant to do that.

One thing she pointed out was that their licensing fee remained the same and supported their licensing program at 100%; however there was potential change in the licensing year for 2016-2017 due to the merger of Department Agriculture, Trade and Consumer Protection and Dept. of Health Services Food Safety and Recreation and Licensing, at this point she was not sure where it stood. Come next year there might be changes to the fee.

Xiong informed that in Dec 2014 they had their 140 audit review which certified the BC Health Department as a Level 3 for the next five year cycle. This was a process that was very tedious. In November 2014 they did a Community Health Needs Assessment focusing on four areas (alcohol & drug misuse, oral health, mental health and nutrition) to develop a Community Health Improvement Plan which was finalized. This was with their community partners and health care providers.

Lastly the relocation of the Health Department had been discussed for a few years now and it was decided that they would be moved downtown to the Sophie Beaumont building joining Human Services in April of 2016.

Robinson thanked Xiong and her staff for all the work they were doing.

One issue that had been brought up with regard to the move to Sophie Beaumont was parking for folks coming to the Health Department; Robinson asked how it was being addressed. It was Xiong's understanding that free to park parking spaces will be made available which assured her that their clients will be served. The county cars that currently parked there would be cleared out and there will be 20 plus parking spots available for clients coming in. One thing that her predecessor and she stressed was that they wanted to make sure there were no barriers in front of their clients because these individuals were coming in for their Tuberculosis medication, HIV testing, vaccines preventable diseases such as measles, mumps, and rubella; and some clients could not afford parking. Xiong informed that they saw roughly 40 or so clients a day, each for approximately 15-30 minutes. There was also a garage that they would use for car seat installation. Robinson questioned if there was concern with maxing out the 20 and was there room to expand the number of parking spots? To him, that was a fairly important thing. Xiong was unable to answer that. Pritzl stated that the parking spots were currently used by some director's, the County Executive and for county vehicles to transport clients or by staff for various activities. Those vehicles would be displaced. Parking was a problem that they managed every day; they had people that plugged meters, got towed, and try and solve this problem in very creative ways. Xiong and Pritzl explained that there was a planning committee in place to look at all the issues associated with the move, so that the public and operational needs were met. They didn't know if that number was adequate or not and that group would identify what they had to work with, what they needed and what they needed to ask for.

Robinson felt Pritzl answered the question, parking was a problem and now they were adding more need. Pritzl felt part of it was because of how they were configured with their vehicles and once they start moving them offsite then they will be able to figure out the traffic flow and what it meant for the number of people coming. Robinson was all in favor of consolidating into buildings because it was making better use of space but he didn't want this to make it harder for people to access services they were intending them to get to. This went for office space as well. If they could make it work, wonderful.

Xiong informed that they were trying to explore all the possibilities such as holding clinics off-site and into the community; either at the library, museum, and at the Aging Disability Resource Center. Agreeing with Pritzl, they needed to look at the logistics and other options and opportunities. She understood that there was office space available downtown and they were spending a lot of money on rent that funding could be used for other programs.

Given the bigger picture, Robinson questioned if they felt good about the move? Xiong responded that change was difficult, there were pros and cons and she had been thinking about it seriously and worried about programs and services and staff and parking but she was trying to look at it more as a positive. Looking at health care in other areas where they were limited in their resources and what they had but they make their means by taking advantage of opportunities and using their resources. She didn't know if it would work out as things were undetermined at this point but she was trying to be positive. Yes, she would love to have more but she was trying to be fiscally responsible and also make sure that the services were being provided.

Responding to Evans, Xiong informed that they were at 11,000 sq. ft. currently and would go to 7,800 sq. ft. Streckenbach clarified that the 11,000 was not technically all useable space. Of actual program space, it was closer to 8,500 sq. ft. People may question if it was ideal, no one wanted change however

there was an opportunity to take advantage of underutilized space. From their perspective, they were trying to figure out how they were able to bring forward the Health Department into the Human Services Department that could take advantage of the space that had been vacated by long term care. From the initial specs of what Facilities put together, they felt it could be done and the space was available. They had been moving people around since 2012 knowing eventually that they looking at doing this. Initial reviews that were done with the former Human Service Director and now with Pritzl, they felt that this could be done.

Supervisor Evans questioned if there were problem where they were right now with their customers being served, Xiong responded, no. Evans stated, it's not broke, but they were going to fix it. This was more of an Executive move than a legislative move and didn't know how much say they had over it. It bothered him when he heard that they had planning and logistic barriers and difficulties that they had to figure out when nothing was broken right now. It bothered him when they said it was undetermined if it would work but nothing was broke right now. He knew by going there for meetings that there was unusable space but he saw how tight it was now. He worried about the statement where they could use other county facilities as the population that they dealt with knew where they needed to go to get services and let's confuse them even more. He would be against the move, he understood where she was coming from fiscally but he'd rather see the county buy a building.

Xiong informed that they were currently paying on a month to month basis to use the current facility. The move would save them about \$88,000; \$84,000 was rent, \$4,000 was parking.

Clancy questioned if a shuttle service for county employees was ever considered so there wasn't a traffic problem. Evans stated that that was a whole other issue but he appreciated the comment.

Motion made by Supervisor La Violette, seconded by Supervisor Robinson to approve the Health Department budget. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Human Services Department

13. **Review of 2016 Department Budget.**

Pritzl stated they had been working very hard to get their budget ready the past few months. He couldn't say enough to start with the amount of work the management team at Human services had put into this as well as the amount of support and commitment and devotion to the populations that they served and how it came to play when they put together a document like this in terms of a budget. He couldn't say enough about how gifted he was to have the team he had behind him.

Pritzl informed that they had the transition of Family Care and it was not done and delayed to some extent so they had to figure out how that impacted things. They had to deal with the fact that they had new key management positions such as his position, their new Finance Manager, and the Hospital Nursing Administrator. They were all coming together right now to start advancing this work and their priorities for 2016. They put together something that made sense within the framework they were working with and highlighted items in terms of the budget.

Pritzl briefly went through the Summary Highlights on pg. 122 of the budget book. Overall they tried to put together a package that had some new initiatives, new directions, at the same time preserving their current services in a way that built on what they could do well. They were grateful for the support of the board, the committee and the County Executive. As they put it together, it was good to have that guidance but also to be able to have those conversations of what did they need and how do they move ahead.

Responding to Evans question regarding funds for Family Care for 2016, Weininger stated that they were taking some General Government revenue and putting it in their budget to help offset the cost of that payment. The reason they were doing that was they didn't want to go into a negative fund balance for Community Programs. They put it in there to balance it, so in 2016 there will be about \$700,000 in the fund balance, 2017 will dip down to \$364,000 but every year subsequent it started building up so 2018 was \$500,000, 2019 would be about \$1.3, 2020 would be about \$2.5, 2021 would be about \$3.6 – that was holding everything constant.

Motion made by Supervisor La Violette, seconded by Supervisor Hoyer to approve the Human Services budget. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

- a. **Resolution re: Approving New or Deleted Positions during the 2016 Budget Process (Human Services – Community Programs).**

Motion made by Supervisor Hoyer, seconded by Supervisor Haefs to approve with the amendment to delete a Clerk II and add an Overpayment Specialist. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

- b. **Resolution re: Approving New or Deleted Positions during the 2016 Budget Process (Human Services - Community Treatment Center).**

Motion made by Supervisor Hoyer, seconded by Supervisor Robinson to approve with the amendment to increase the FTE count by an additional 3.5 Nursing Assistant positions and also increase General Revenue under the CTC budget by \$159,374. Roll Call Taken: La Violette, Robinson, Evans, Hoyer, Haefs. MOTION CARRIED UNANIMOUSLY

Other

14. **Audit of bills.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to pay the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

15. **Such other Matters as Authorized by Law.**

- a. **Discussion regarding dates and times for November and December meetings.**

November 18, 2015

December to be determined.

16. **Adjourn.**

Motion made by Supervisor Robinson, seconded by Supervisor Hoyer to adjourn at 7:42 p.m. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Alicia A. Loehlein
Recording Secretary

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**PROCEEDINGS OF THE AGING & DISABILITY RESOURCE CENTER BOARD OF
DIRECTOR'S MEETING** **SEPTEMBER 24, 2015**

PRESENT: Marvin Rucker, Beth Relich, Barbara Robinson, Joan Swigert, Pat Finder-Stone, Lisa Van Donsel, Larry Epstein, Supervisor Corrie Campbell, Pat Hickey

EXCUSED: Jessica Nell, Melanie Maczka

ABSENT: Ramon Fierros, Lori Rasmussen

ALSO PRESENT: Debra Bowers, Kinsey Black, Devon Christianson, Christel Giesen, Laurie Ropson, Jeremy Slusarek, Sandy Groeschel, Kelly Palmquist, Denise Misovec, Melissa Spielman, Tina Whetung, Dan Kane

The meeting was called to order by Chairperson Rucker at 8:35 a.m.

PLEDGE OF ALLEGIANCE

INTRODUCTIONS

ADOPTION OF THE AGENDA:

Mr. Epstein/Ms. Swigert moved to adopt the August 27, 2015 amended agenda to include moving Prepare Now under the Emergency Management section. **MOTION CARRIED.**

APPROVAL OF THE MINUTES OF MEETING OF AUGUST 27, 2015:

Ms. Van Donsel /Ms. Relich moved to approve the minutes of the regular meeting of August 27, 2015. **MOTION CARRIED.**

COMMENTS FROM THE PUBLIC: None.

FINANCE REPORT:

A. REVIEW AND APPROVAL OF AUGUST, 2015 FINANCE REPORT:

Ms. Bowers reviewed the August 2015 Financial Highlights reviewing noticeable variable items in the finance summary. Due to staff position transitions and turnover throughout 2015, we are coming in under budget with salary and fringe. Ms. Bowers pointed out a new line item under nutrition revenue housing units. NEW Curative is now helping offset the unfunded costs of the nutrition program at their adult daycare sites. Food costs are coming in under budget due to actual meals served coming in lower than projected. The In-Kind numbers will show an increase in the September report due to quarterly entry. Currently revenue is greater than expenses due to grants that come in lump sum payments. This is expected to equalize as we move into the 4th quarter.

Ms. Finder-Stone/Mr. Epstein moved to approve the August 2015 finance report. **MOTION CARRIED.**

B. REVIEW AND APPROVAL OF RESTRICTED DONATIONS:

Ms. Bowers referred to the Restricted Revenue & Expense handout to show that the ADRC did not receive any restricted donations in the month of August.

Ms. Relich/Ms. Van Donsel moved to approve the restricted donations for August 2015. **MOTION CARRIED.**

BROWN COUNTY EMERGENCY MANAGEMENT:

Ms. Spielman, Brown County Emergency Management, presented the role of the Brown County Emergency Management department which includes four phases of emergency management:

preparedness, response, recovery, and mitigation. The response and recovery section is very small; however, preparedness is very large. The Brown County Emergency Management department employs two staff but during activation up to thirty persons may come in including emergency personnel. An elected official of the jurisdiction would need to declare a state of emergency and work with Brown County Emergency Management to determine what resources are needed. To declare a state of emergency or request disaster emergency funding, an elected official must make that decision. At a city level it would be the Mayor and at the county level it would be the County Executive or the County Board Chair. During activation, it's imperative that everything is documented in order to receive state or federal funding. Brown County Emergency Management coordinate when people need to be rotated in and out of a disaster situation, if there are enough resources available to continue managing the emergency, and what agencies need to be called in for assistance.

When an evacuation needs to occur, the current municipality is responsible at the ground level. Most often the process is door to door evacuation by law enforcement. Due to the inability to maintain accurate local resident information, a list of those residents who are elderly or disabled needing assistance hasn't been feasible. In previous years, a reverse 9-1-1 system was used as a notification tool in the event of an emergency. This system could reverse call all land lines from the 9-1-1 center to alert consumers of the emergency situation. Unfortunately, 80% of calls coming into the 9-1-1 center come from cell phones and these devices are "opt in" only for this software program. The funding for this software program ended a few years ago, was taken to the public safety committee, and was voted down due to the expense of the software. Supervisor Campbell asked if this would be included on the underfunded/unfunded list requested by the County Board. Ms. Spielman indicated that they are currently looking for a software program and system that is going to be the best solution and will include this on the list provided to the Board.

Ms. Christianson indicated that not only are consumers not interested in opting into a list but their level of disability can change continuously. Having incorrect information and the ADRC being unavailable on weekends are concerns. Supervisor Campbell would like to offer consumers the opportunity to opt into a list and would like to see the ADRC explore coordination with neighborhood associations in each municipality to start emergency lists.

Ms. Spielman indicated that getting information into the hands of the people is the struggle. The key to emergency response is each person being personally prepared with alternative plans. Board members discussed using multiple forms of advertising, possibly including using radio advertisements to ask people to opt in to receive emergency alerts through text messages and then sending out a text message twice per year asking people if they want to continue to opt in. Other options included: TV, Newspaper, filling out a form, and mailing to target zip codes.

Supervisor Campbell asked if a regular safety section could be incorporated into the AddLife Newsletter. Ms. Christianson discussed that the ADRC can provide education, information, offer presentations, hand out information, and give consumers the tools they need to prepare for emergency situations. Ms. Christianson highlighted the Prepare Now document that is handed out to consumers and indicated that if worried about a neighbor, contact the non-emergency police line and they will do a welfare check.

Ms. Spielman appreciated all of the feedback from the ADRC Board members.

Ms. Christianson discussed the measures ADRC staff takes to be prepared for emergencies. Ms. Christianson referred to the Emergency Crisis Continuity of Operations Plan and asked Ms. Ropson to go over some of the highlights. Ms. Ropson indicated that employees have a duty to report and that each employee receives an Emergency Communication Plan packet of information which includes: information on how to call into voicemail to retrieve emergency communications, the Emergency Communication Plan, and a list of Staff phone numbers. The agency also has a Crisis Management Team in which Ms. Christianson is the coordinator. The UW Extension is a backup location for ADRC Staff to report in case the building isn't useable. Brown County Information Services department has

ADDLIFE PROGRAM REPORT:

Mr. Slusarek, AddLife Program Coordinator, is always looking for new ways to get consumers involved. Coffee and Conversation is a new program that takes place once per month. This program involves a guest speaker each month conversing over coffee in the atrium with consumers. So far the guests have included emergency responders and coming up will be news broadcasters. Due to computer class requests, we now offer a class led by a volunteer and iPad training classes have had an overwhelming turnout which has led to a second opportunity for this training later this year.

Another exciting event coming up will be "Make It and Take It" workshops with a local published author.

The Wellness Studio is utilized by the YMCA who offers Zumba, Sit & Be Fit, and Stretch & Balance and Chair Yoga and Arthritis Exercise are offered by volunteer instructors. Jin Shin Jyutsu and Hand Reflexology instructors are currently renting space to offer their programs.

Approximately 40 consumers are coming regularly each month to the free Campus Kitchen dinner. This is a partnership with UWGB where students repurposes food from local restaurants and make it into a complete meal for low income persons in the community. Expansion of this program is planned at rural sites in the future. Cooking classes are offered each month in the newly remodeled kitchen where consumers can taste what they make. New Leaf market will also be using the kitchen facility to offer cooking classes to create a complete "start to finish" meal. The \$10 fee for this event can be waived if someone can't afford it. An ADRC staff person volunteers her time in the evenings to instruct a three part cooking series, *Cooking for Independent Living*, engaging young adults with disabilities. This class helps the young adults meet new people, gain friendships, and learn skills firsthand. Over the holidays, the students from this class will get together for a reunion cookie making class and distribute their cookies to shelters and ADRC events.

Dining hours have expanded to 11 – 12:30 and meals are now served on red plates instead of trays. In addition, diners now check in with a volunteer when they arrive who brings them coffee and when making reminder calls for events, the Welcome Center asks consumers to come early or stay for lunch. Many consumers have not previously been aware of this option which has increased the number of registered diners to over 400.

Right now, the AddLife Center has a core group of volunteers help with early bird registrations, farmer's market vouchers, and AddLife activities which has helped to alleviate the Welcome Center from these tasks. The General Brown County Advocacy Team, GBCAT, will begin meeting again this fall. This group has a core group of members that meet regularly and approximately 50 people on an e-mail list that can be called upon when needed. The goal is to continue outreach efforts to expand the e-mail list to more than 100 over the next year. Mr. Slusarek thanked Ms. Van Donsel for volunteering at the Casino Night and calling bingo at another event and encouraged other Board Members to volunteer for events they may be interested in participating in.

Moving forward, Mr. Slusarek enjoys bringing new programming to the ADRC and welcomed new ideas from Board Members.

Ms. Christianson mentioned that a building use policy is currently in the works and will be presented to the Board at a future meeting. Outside groups are able to come into the ADRC and pay for space during the day, evening, and weekends which will help generate revenue.

Ms. Christianson shared that Jeremy has been employed at the ADRC for 18 years and shares his talent with the agency and has a gift of connection with consumers. Board Members thanked Jeremy for all he has done at this agency.

DIRECTORS REPORT:

A. ADRC 2016 CONTRACT PROPOSED CHANGES:

Ms. Christianson highlighted Sister Melanie Maczka's article in the Green Bay Press Gazette. Sister Melanie, who helped found Casa ALBA in 2012, received the prestigious Ohtli award during a ceremony in Chicago. Ms. Christianson passed around a card for anyone wishing to send a congratulatory message.

Ms. Christianson referred to the ADRC Contract handout and the Summary of Changes – Proposed 2016 ADRC Contract handout and highlighted the proposed changes. Brown County has been doing very well in many of the areas, such as Prevention, so the contract requirements are not well beyond our reach. Statewide branding is a theme throughout the draft contract and a business plan. The ADRC logo will only be able to be used if it is blue and white or white and blue. Additional reporting and measurements will need to be created that include the exact cost of each of our services such as I & A, Options Counseling, Benefit Counseling et. The business plan will also need to demonstrate how the public is being engaged and how the ADRC is reaching consumers we do not currently know about. New, creative ways to generate revenue will need to be explored and a business acumen set of strategies employed. The state is trying to position ADRC's to be strong and consistent. Current business hours are 8 – 4:30 and evening appointments are offered if necessary. Current and potential users will need to be polled to find out the most convenient days and times to visit the ADRC and the ADRC will need to modify its hours to accommodate the needs. Several ADRC's are getting together to discuss best practices and how to move forward on some of these issues and figure out the next steps on how to move forward. Ms. Christianson will be presenting at the state all agency meeting for Bureau on Aging and Disability Resources (BADR) on October 13 to discuss how we have integrated Aging and ADRC services, what's important about integrating, and how we partner with independent living centers.

B. AGING 2016-2018 FINAL PLAN: PUBLIC HEARING:

Ms. Christianson indicated that the Public Hearing this year had a better turn out than in year's past. Ms. Christianson referred to the ADRC of Brown County Public Hearing Feedback handout and highlighted some of the recommendations.

Discussion occurred around Twitter, how it works, and if the ADRC should communicate in this method in the future. Supervisor Campbell indicated that, in her experience, this is a great way to connect with the media.

Mr. Epstein asked if Eldertree could be added as an addition to the Public Hearing document.

Discussion occurred around ideas and options which would allow fresh fruits and vegetables to be included with the meal.

Ms. Finder-Stone/Ms. Hickey moved to approve integration of the public hearing information into the Aging 2016-2018 Final Plan. **MOTION CARRIED**

C. OCTOBER 16 STAFF APPRECIATION EVENT:

Ms. Christianson again invited all Board members to the All-Agency Meeting taking place on Friday, October 16 at the ADRC from 1:00 – 4:30 p.m. Paul Wesselmann, inspirational speaker, will be presenting to staff for all of the extra work they have put in during the Family Care transition. Paul will also be speaking at a caregiver event and for the Brown County Wellness Committee for Brown County staff during his time here as well. If unable to attend, please let Ms. Christianson know. Ms. Giesen passed out the Self-Care for Those Who Give flyer which is the evening event Paul Wesselmann will be speaking at for Caregivers. Ms. Giesen asked Board Members to share this event information with anyone who may be interested.

D. PUBLIC LIST OF ADRC BOARD MEMBERS:

Ms. Christianson shared the updated document that lists Board Members names, e-mail addresses, and term limits.

E. LASERFICHE DISCUSSION:

Ms. Ropson briefly described Laserfiche, document management software, which is used to store and organize all consumer and agency records. If interested, Board Members would be able access Laserfiche by using a username and password and be able to view Board information through an online log-in. Ms. Ropson will demonstrate this software at a future Board meeting. Moving to this process would require no additional work for administrative staff.

F. REQUEST FOR C1-C2 TRANSFER FOR NUTRITION PROGRAM:

Ms. Christianson discussed that traditionally 40% of the C1 funds have been transferred from C1, nutrition congregate dollars, to C2, home delivered meal dollars. Home Delivered Meals has continually expanded and the designated amount for C2 would not allow meals to be provided to all Home Delivered Meal candidates. Within the Nutrition budget, the 40% transfer of C1 to C2 has always met the needs on both sides. The state is now enforcing a requirement which allows 20% to be transferred from C1 to C2 and a waiver must be completed in order to transfer 40%. Overall, the State cannot transfer more than 20% across the board. All requests will be reviewed by the State and ADRC's will be notified in January the amount of C1 they will be able to transfer to C2. Ms. Christianson has changed the 2016 budget to reflect this change.

Supervisor Campbell /Ms. Swigert moved to approve the request for C1-C2 transfer for nutrition program. **MOTION CARRIED**

FAMILY CARE UPDATE: Ms. Christianson discussed that insurance agencies will potentially be responders to the RPF's for Act 55's requirements to create an integrated acute and long term care system that will replace the current Family Care program by January of 2017. The next 2 years will include a review and waiver request to CMS for this new system to be developed.

LEGISLATIVE UPDATES: Supervisor Campbell would like to invite legislators to the ADRC to ask about becoming a pilot for the region and how they might help advocate for that. Ms. Christianson agreed that relationships matter and inviting them here is critical.

Ms. Christianson will be getting the ADRC concept paper and share with the board to get a sense of what we're asking for. Then all legislators in Brown County would be invited to an informational meeting. Ms. Christianson also recommends that we engage surrounding counties before moving forward without them.

ANNOUNCEMENTS: Ms. Finder-Stone mentioned that the Assistive Technology fair at Lambeau Field yesterday was a wonderful event.

NEXT MEETING – The next meeting will be October 22nd, 2015 at 8:30 a.m. at Options for Independent Living, 555 Country Club Rd, Green Bay.

ADJOURN:

Ms. Hickey/Ms. Relich moved to adjourn the meeting. **MOTION CARRIED.**
The meeting adjourned at 11:31 a.m.

Respectfully submitted,

Kinsey Black, Administrative Specialist

PROCEEDINGS OF THE BOARD OF HEALTH MEETING
Tuesday, August 25, 2015
5:00 PM

Present: J.J. Tibbetts, MD, Audrey Murphy, Joe Van Deurzen, Harold Pfothhauer, Richard Schadewald, Karen Sanchez

Excused: Susan Paulus Smith

Staff Present: Chua Xiong, Rob Gollman, Ann Steinberger, Juliana Ruenzel, Patti Smeester (minutes recorder)

1. Call to Order, Welcome, and Introductions

Audrey called the meeting to order.

2. Approval / Modification of the Agenda

MOTION: To approve the agenda as presented.

Schadewald / Pfothhauer

MOTION CARRIED

3. Approval of Minutes of July 28, 2015

MOTION: To approve the minutes

Van Deurzen / Schadewald

Audrey indicated page 1, 1st paragraph "educated" should say "education". On Page 3 in 1st paragraph the word portable water should be potable water. Dr. Tibbetts indicated under "All other Business Authorized by Law", the second sentence should be changed from 27 people to 21 people.

MOTION: To approve the minutes as amended.

Pfothhauer / Schadewald

MOTION CARRIED

4. Open Session: Discussion and possible action regarding the Shirley Wind Turbines.

MOTION: To depart from the regular order of business.

Van Deurzen / Schadewald

Bill Meindl, 125 W. Mission Road, stated at the last two Board of Health meetings the Shirley Wind Power Project has been brought up under "All Other Business Authorized By Law". He continued that he has attended a lot of government meetings and he indicates that line item is very rarely utilized and to some degree is for emergencies only. He believes the Shirley Wind Project should be brought up when that item is being discussed on the agenda. His second concern is that he would like some assurance or clarification that when the Board of Health goes into closed session that there will be no communication with anyone outside of that session.

Audrey asked Juliana Ruenzel if she wanted to comment. Juliana was unaware of anyone communicating outside of that meeting and unless there is some kind of verification she cannot address it. Audrey indicated she was also unaware of this.

Pam Schauer, 6225 Highview Road, stated she has six turbines within 1 ½ miles of her house. She indicated she has problems sleeping during the evenings and has that documented and brought to the Board. She went on vacation August 10th through August 14th with her youngest son to Michigan for a total of 4 days and 3 nights. She was able to sleep 8 hours without any problem. She would

wake up at 6 am and had plenty of energy. When she came back from vacation the first night she slept 10 hours but she didn't wake up with interrupted sleep but from then on she had restless sleep that she had prior to the vacation. She wanted the Board to be aware that her son had increased energy when he was away from the wind turbines. He is twelve and experienced decreased energy as well when they got back.

- 5. Closed Session: Notice is hereby given that the governmental body will adjourn into a closed session for discussion with legal counsel, possible action and the strategy to adopt regarding the Shirley Wind Turbines as it relates to the analysis of the supporting documents. Closed session is authorized pursuant to Wis. Stat§ 19.85 (1)(g), for the purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is likely to become involved.**

MOTION: To go into closed session at 5:10 PM.

Schadewald/Van Deurzen

Roll call vote: Ayes: Schadewald, Van Deurzen, Pfotenhauer, Tibbetts, Sanchez and Murphy

Nays: None

MOTION CARRIED.

- 6. Reconvene into Open Session: Discussion and possible action regarding the Shirley Wind Turbines and the analysis of the supporting documents.**

Reconvene into open session at 6:08 PM.

MOTION: That a deadline date of September 30, 2015 be set for the submission of all documents to the Health Director concerning the Shirley Wind Project so that a decision can be made by the end of the year.

Schadewald/Van Deurzen

MOTION CARRIED.

Chua stated that based upon what she has read so far this is what I plan to do. Continue to read the documents that have been submitted to her and to start setting up meetings with various interested parties including the Brown County Citizens for Responsible Wind Energy or anyone she feels will assist her in this process. Her plans are to meet with a few of the residents with the Shirley Wind Project that have already been in contact with her to get their input. She will also be taking on a master prepared public health student to help her in this process and assist her in this work with the wind turbines. She plans to call and speak to some of the well renowned doctors who have submitted their testimonies as well.

- 7. All Other Business Authorized by Law**

- 8. Adjournment / Next Meeting Schedule**

MOTION: To adjourn meeting at 6:12 PM.

Van Deurzen / Pfotenhauer

MOTION CARRIED

UPCOMING MEETINGS:

October 13, 2015 5:00 PM

December 15, 2015 5:00 PM

At Brown County Health Department, 610 S. Broadway St., Green Bay, WI 54303

PROCEEDINGS OF THE COMMUNITY OPTIONS PROGRAM PLANNING COMMITTEE

A regular meeting of the Brown County Community Options Program Planning Committee took place on Monday, October 26, 2015 at 111 North Jefferson Street, Green Bay, Wisconsin.

Present: Helen Desotell, Mary Hansen, Pat Hickey, Sandy Juno, Mary Schlautman, John VanderLeest, Chua Xiong, Lori Weaver

Absent: None

Excused:

Others Present: Mary Rasmussen of BCHSD

Chairperson Mary Schlautman called the meeting to order at 8:37 a.m. with roll call. A quorum was present.

MODIFICATION/APPROVAL OF AGENDA

MOTION: Ms. Desotell moved to approve the agenda as mailed. Ms. Hickey seconded. Motion carried unanimously.

MODIFICATION/APPROVAL OF MINUTES

MOTION: Mr. VanderLeest moved to approve the July 20, 2015 minutes as mailed. Ms. Hickey seconded. Motion carried unanimously.

GENERAL UPDATES

Family Care Update – Ms. Weaver said there are no COP or CIP updates as all consumers have transitioned to Family Care as of October 1, 2015. Our transition process was accomplished with lots of hard work. In addition to her own involvement, Ms. Weaver also recognized Mary Hansen, Mary Schlautman and the Economic Support unit as key players in the success of the transition. The state was impressed with how well we did with the transition process. They are suggesting that other counties not yet transitioned to Family Care to contact Brown County for ideas and guidance. All of the remaining counties in our area should complete the enrollment and transition process by the end of December with the exception of tribal entities. Because of their sovereign nation status, the Oneida Community Options Program has the option to continue as waiver agency to serve members of the tribe. Ms. Schlautman said her staff will be doing enrollments for the tribes, but it is expected that a lot of tribal consumers will choose tribal waiver programs to avoid having to be on the ADRC's wait list for Family Care / IRIS.

Regarding the ADRC's wait list, Ms. Schlautman said her staff members have taken 84 individuals off the list so far. Through attrition they were able to add 44 slots, 20 of which have already been filled. They are on track to work through the list rapidly.

Committee's Role – Referring to attachment 5C, Ms. Weaver said since the Committee last met, statute 46.27(13) has been added. It states the county's long-term planning committee can dissolve as of 1/1/16. However, statute 46.27(4)(1)1(am) remains, which states that the county's long-term planning committee can dissolve if the ADRC agency assumes the duties of the county's committee. So we are looking for

PROCEEDINGS OF COMMUNITY OPTIONS PLANNING COMMITTEE – October 26, 2015

ideas and recommendations. There is new statutory language under 46.272 to describe the “CCOP” (or children’s COP) program.

Ms. Schlautman said this was brought before the ADRC Board a few months ago, and it was thought that the ADRC taking over the role of the long-term planning committee would be a conflict of interest. They voted not to take on that role. She thinks this language is in the statute because in a lot of counties, the ADRC and long-term care agencies are closely intertwined, which is not the case in Brown County. Ms. Weaver said she has asked for this matter to go back to the ADRC Board for further discussion since other statute language was added. Ms. Schlautman said the ADRC Board meets one more time before the end of the year, but it was her understanding that the long-term planning committee could dissolve and then restructure as the CCOP Advisory Committee. Ms. Weaver said there is an existing Child and Family Advisory Council. Membership includes parents and professionals from related agencies.

After more discussion, Mr. VanderLeest made the following motion:

MOTION: Mr. VanderLeest moved to dissolve the COP Planning and Appeals Committee as of the end of the day, December 31, 2015. Further, the Committee would be restructured and formed to take on any future duties with regard to Brown County’s Children’s COP effective 1/1/16. Ms. Hansen seconded. Motion carried unanimously.

Mr. VanderLeest suggested that Ms. Weaver contact Mr. Streckenbach to get his input on what the new Committee’s structure and composition should be, whether there should be elected officials on the Committee, etc. and added that if elected officials were needed he would be willing to serve. He said it is good to have some continuity from the old committee to the new one. Ms. Schlautman said she would be willing to serve if representation from the ADRC is necessary. Ms. Hansen is also interested. Ms. Weaver said she will bring this suggestion forward to Mr. Pritzl.

MOTION: Mr. VanderLeest moved to receive the updates and place on file. Ms. Juno seconded. Motion carried unanimously.

MOTION: Mr. VanderLeest moved to adjourn. Ms. Desotell seconded. Motion carried unanimously. The meeting adjourned at 8:53 a.m.

Respectfully submitted,
Mary Rasmussen

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PROCEEDINGS OF THE AD HOC
MENTAL HEALTH TREATMENT COMMITTEE

Pursuant to Section 19.84, Wis. Stats., notice is hereby given to the public that an Ad Hoc Committee of the County Board of Supervisors met regarding Mental Health Treatment on Thursday, September 24, 2015 at 6:00 pm in Room 365, Community Treatment Center, 3150 Gershwin Drive, Green Bay, Wisconsin.

Present: Supervisor Zima, Supervisor Hoyer, Supervisor Robinson

Also Present: Luke Schubert, Erik Pritzl, Dave Lasee, Sheriff Gossage, Rebecca Lindner, Cheryl Weber, Phil Steffen

I. Call meeting to order.

The meeting was called to order by Supervisor Guy Zima at 6:06 pm.

II. Approve/modify agenda.

Motion made by Supervisor Hoyer, seconded by Luke Schubert to approve the agenda. Vote taken.
MOTION CARRIED UNANIMOUSLY

III. Election of Chair.

Sheriff John Gossage nominated Guy Zima as Chairman of this Committee.

Motion made by Supervisor Hoyer, seconded by Supervisor Pritzl to close the nominations and cast unanimous ballot. Vote taken. MOTION CARRIED UNANIMOUSLY

Zima stated that he will accept the chairmanship of this committee however, he wanted to be sure that people knew this is not an ego thing at all, but rather, he just wants to get something done. Sheriff Gossage said that since Zima had prior history and experience in working on mental health issues throughout the county for a number of years, he would be a good choice for Chair. Zima stated that he served on the 5142 Board and also on the Human Services Committee as well as the Public Safety Committee and his long term experience is what prompted him to bring this issue forward.

IV. Election of Vice Chair.

Zima nominated Erik Hoyer as Vice Chairman of this Committee.

Motion made by Guy Zima, seconded by Erik Pritzl to close the nominations and cast unanimous ballot. Vote taken. MOTION CARRIED UNANIMOUSLY

DA David Lasee arrived at 6:15 pm.

V. Set date and time for regular meetings.

After discussing the meeting dates and times, it was decided to meet on the third Thursday of the month at 4:00 pm. Meetings will be held in the board room at the Sophie Beaumont Building.

- 1. Discussion, review and possible action: Request that Brown County review its past and present mental health services and develop a more comprehensive plan to treat both short and long-term mental health**

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patients including but not limited to 1) alcohol and drug abuse detox and treatment; and 2) children, adolescent and adult mental health treatment.

- 2. Discussion, review and possible action: Request that the Human Services Director and Brown County Sheriff work together to develop a plan to provide a treatment plan for prisoners who presently make up a third of our jail population.**

Both of the above Items were taken together.

Zima stated that this committee has a common goal and he would like the meetings kept progressive with goals being set, reports being heard and then discussed. Robinson noted that his attendance would be hit and miss due to his work schedule, but noted that Hoyer is the official rep of the Human Services Committee. Zima noted that if anyone has special scheduling needs to let him know as accommodations could possibly be made. Zima also noted that he would like this committee to give regular updates to the Human Services Committee.

At this time, Hospital and Nursing Home Administrator Luke Schubert provided the committee with an overview of the facilities and programs provided. He stated that on the inpatient side they have a 63 bed skilled nursing facility. They always keep two beds open for emergency protective placement so if someone is in a lower level setting and has a need that is not being met in their current environment, they could be brought in to those emergency beds. The nursing home stays consistently pretty full.

With regard to the hospital, Schubert noted that a few years ago they had 30 beds, but about a year and a half ago they split the unit in half and made a few other modifications to convert to having a 16 bed hospital with a 15 bed CBRF that is licensed for crisis stabilization. There have been some up and down census numbers in the CBRF and this has been getting some attention recently as over the last 6 – 9 months they have been averaging about 1 or 2 residents. Schubert stated they are currently at 6 and are working on increasing the numbers with marketing efforts.

Zima asked for the history of what the facility was 10 years ago compared to what it is today. Schubert's understanding was that the hospital census was declining and a decision was made that the 31 bed hospital was not needed and that was part of the motivator to downsize to the 16 bed psychiatric hospital. He noted that the census at the psychiatric hospital is pretty consistent at 10 – 12 and they always keep 4 beds open for in-county placements. The average length of stay is 4 days and on any given day they could have a census anywhere from 5 to 16, but it tends to be closer to 10 – 16. At times they do have to divert patients to other facilities when the capacity is at a maximum.

Zima asked what the county's largest capacity was and Assistant Corporation Counsel Rebecca Lindner thought that the adult inpatient beds had always been the same and what used to be Unit 7 was 31 or 32 beds plus additional beds for adolescents. She also noted that the nursing home had more capacity at the old facility. Zima recalled that there was a time when Brown County was sheltering mentally disadvantaged people and due to a law change these people were put in a less restrictive environment which was good in

a lot of cases. However, at the same time, some of these people migrated their way into the jail system which has put pressure on the jail facility. Zima continued that his sense is that building additional pods at the jail is hanging over the County's head.

Zima continued that 16 beds for a county the size of Brown County seems somewhat miniscule. He noted that the nursing home used to be much bigger but because a lot of the population migrated out through the law, a smaller facility at a lesser cost was built, but he feels the time has come to make a determination as to where the County wants to house the mentally ill. Should these people be housed in a facility where they can get some help and are less problematic and do not find their way into the court system, or do we just want to keep treating them in the overloaded jail system? Gossage noted that they do not treat people in the jail and Zima stated he did not think the jail should become a treatment facility. He felt that treating the mentally ill as criminals is not the way to go and further, the jail staff is not geared to provide treatment. Zima did not think it took a strong mind to figure out that having a facility at the CTC that can give the people the proper treatment is the way to go. He realizes there would be a cost to this, but noted that everyone at this meeting agrees that there is a common goal that needs to be met. Zima continued that band-aids year after year are not appropriate and the county needs to find a way to deal with these issues. He noted that one-third of the jail population has some level of mental health issues. Zima felt that if half of those people are diverted through a mental health facility and stay out of the jail, it will push back the date that the big, ugly addition has to be made to the jail. He is hopeful that everyone on this committee is focused and will not accept any bureaucratic foot dragging.

Director of Administrator Chad Weininger arrived at 6:30 pm.

Zima welcomed Weininger to the meeting and indicated that as the liaison to the County Executive, he fully expects County Executive Streckenbach not to hide on this. Zima will not allow that.

Pritzl stated that he felt his perspective may be slightly different than Zima's and he wanted to speak to the group about this so they understand. He stated that there are a lot of pieces to this. What he wants is for people who have a mental health need who present for treatment to have access to care. Where the care occurs seems to be where different opinions are starting to be seen. Pritzl stated that he is interested to hear why people with mental health issues are ending up in the jail. He is not interested in going down the track of "let's build something else" because he does not think this is just about putting people places. He agreed that there are definitely people who could benefit from diversion and sometimes they end up in the jail system and a way has to be figured out to get them out to an appropriate place for treatment. Pritzl does not want this framed as an either/or situation; either build a jail or build a hospital. He felt that there was more to this than simply placement. Zima stated that all of the people that need mental health treatment are not in the jail. They are on the streets, in the homeless shelters and a number of other places, but they find their ways into the jail system rather than a mental health system. Zima reminded the group that the County's population grew 20,000 in the last decade yet the county facilities have downsized because they do not want to spend the money. Pritzl responded that it is not that simple. He agreed that the population has increased, but inpatient use in a hospital setting has decreased significantly over the last 30 years. There are many reasons for this such as medications, more community resources and other

things. Population and institutional size are not linked where if one goes up the other one should go up too. Zima stated that what he is referring to is access to treatment.

As to why these people with mental illness are ending up in jail, Gossage shared that law enforcement officers are problem solvers. Many times law enforcement goes to calls at the same residence time after time after time and nothing is done because it is not illegal to be mentally ill in society. In an effort to try to rectify that, sometimes arrests are made. One of the things they are doing is going through CIT training to train and educate officers that these people are acting up based on their mental illness and not because they are trying to overtly commit a criminal act. Gossage felt there has been a better response as of late in this regard, but this is not to say that it does not still occur. One of the challenges that law enforcement has is they do not have the resources to tell someone where to go for help. Another issue is that there is the compliance component and if an individual does not take their medication then they tend to get off the plateau and become more and more of a problem within the jail. Gossage added that with regard to diversion, he has the authority to take someone into custody and monitor them while they are in the jail. If they get booked in, it is his job to be sure that they are monitored and safe. He feels the key component is diversion. Once a judge sends someone to jail, Gossage does not have a choice to not watch them or treat them. There are some components such as the EMP bracelet program where people would be monitored by the bracelet but still have the judge order them to have some type of treatment component.

District Attorney David Lasee added that these people are ending up in jail because they have committed a crime, but in many instances their mental health is driving the criminal behavior. Until our system works its slow wheels, these people have to be supervised somewhere. He said that there are times when a crime was committed and jail may not be the appropriate place to house the offender, but there is no other safe alternative at this point. Jail is sometimes the only safe alternative. There does need to be an alternative and things like the EMP program or day report centers where there is some monitoring involved may be less intrusive settings than the hospital. He hears what Zima is saying, but noted that a hospital is not a cheap alternative and Pritzl agreed. Lasee stated that a hospital may be a more effective facility as jail often exacerbates mental illness. He felt that cost is one issue when it comes to where to house people, but his opinion is that the major issue is to have the right place to put these people. Lasee continued that there are people he would love to help, but there is not much he can do when there is no safe alternative. Additionally, it could take as long as 60 days to have an assessment done on a person on their ability to stand trial and there is no place for them to go in the interim so they sit in the jail until the assessment is done. Cheryl Weber of JOSHUA asked why it takes so long to get an assessment done and Lasee responded that it is due to the waiting list and there are only 10 – 12 people in the state who do the assessments.

Pritzl stated that there are a number of decision points throughout the process, regardless if someone is going in the criminal justice path or a mental health commitment path and he thinks making the right decisions at these points is important. There is a decision point at the initial contact with law enforcement as to whether to take the person into custody or not. After that decision is made, there are other points that follow and Pritzl felt that the decision points should be looked at to see if the right response is being given to those with mental health issues. He continued that there is the mental health court piece that helps to pull people over, but he wondered if there were other things that could be done. Gossage stated that when an arrest is made, it is based in Statutes. If a crime is committed, law enforcement has no other

choice than to take them into custody and go through the follow through of the Crisis Center. His department does a good job of triaging things, but he noted that they are a band-aid, not a treatment facility. They identify the needs that exist and then they talk to the professionals.

Lasee agreed with Pritzl with regard to the decision points and felt that officers are getting better and determining who should be locked up and who should not be and he also noted that the DA's staff is trying to do a better job of making determinations as to issuing cases or evaluating for alternatives. Lasee said his office is very much in favor of diversion out of the system, but there has to be an option and appropriate programs to divert them to. He noted that the number one goal of the DA's office and law enforcement is public safety. When law enforcement is dealing with an individual and they can tell that the person is not safe and is not likely to be safe anytime in the future until there is some intervention, there needs to be some tools to help get that person to that point to ensure public safety. Lasee stated that if law enforcement decides not to lock someone up or the DA's office decides not to keep the individuals locked up and as a result someone gets hurt or killed, or the person harms themselves, there will be much bigger problems. Lasee would like to talk about getting more tools in place.

Jail Security Lieutenant Phil Steffen stated that when the design plan for the mental health center came about, one of the concerns they had at the jail was how it would affect the jail. He stated that the mental health center does a great job of dealing with some people, but what is needed is an intermediate piece of diversion of placement so that when law enforcement deals with someone with mental health issues they can be diverted to intermediate type care to start getting them stabilized, not to a hospital bed or jail bed. He noted that this needs to be a 24/7 center because they deal with people all day long and where they run into problems is that there is not any secondary resources. Zima stated that right now people are either being taken to jail or not charged and neither of those seem to be the right solution. Steffen added that people do have rights and they cannot force people to go to treatment against their will unless it is an arrest type situation or an emergency situation.

Pritzl stated that they do have Bay Haven which is licensed as a CBRF and is actually similar to what Steffen is describing, but the people have to be there voluntarily. He said that often when people are presented with information regarding potential cost, they do not want to be there. Zima said that if there are a large number of law enforcement calls to the same person each month, that is a misuse of resources. Pritzl stated that a person's right to refuse care and treatment is protected. Gossage said that the judge can order diversion with treatment as a condition of bail, but law enforcement cannot make that determination. Lasee stated that they release people from jail with the condition that a person resides in a certain location but a judge has the authority as a condition of bail release to require someone to reside in a specific place.

Weininger asked what additional tools are needed. Gossage stated that a judge can order EMP for intermediate offenders. Lasee added that lower level people can use EMP or, for a different level of care, there could be residential care, but those options are what is needed. Lasee stated that he is not necessarily even talking about expensive hospital residential; it can just be a place for them to stay and they put a bracelet on them to be sure they are where they are supposed to be. Zima felt that if there was

a diversion facility the judge and the district attorney and sheriff could all work together to protect the people and protect people from themselves.

Hoyer asked how many people come to the jail with mental health issues each month. Steffen stated that everyone claims mental health issues when they come to jail, but many times those that actually need the help do not claim it. Steffen said it would take some time to get some specific numbers, but at this time he would estimate that he has five inmates that would need to be supervised outside of the jail because of mental health issues. Weininger asked if there are any organizations that currently have a facility in the community that could be tailored to serve these people. Pritzl stated that they currently have two diversion facilities, both of which are CBRFs. There are 15 beds at Bay Haven and 20 diversion beds for a total of 35 crisis stabilization diversion beds which is a good number. He continued that capacity right now is about 75%. The two facilities look very similar in terms of programming and people they serve, but the one difference is they take residents from other counties in diversion and that facility is a step down with CNAs present, but not 24/7 nursing care or a psychiatrist there. The next step down from this would be a something like an adult family home.

Lindner stated that the problem with the diversion beds at Bay Haven are that they are licensed CBRFs as is Nicolet so if they are talking about individuals being charged with violent felonies, the CBRF licenses will possibly prohibit them from being there. She felt that one thing that should be looked at is what other type of license would allow taking someone with felony charges. Pritzl stated that that is something they could look into, but he did not know if it was possible. Weininger asked if the licenses could be changed and Lindner stated that there is a group looking at a facility that is licensed for alcohol detox. She stated that she spoke with the homeless outreach person earlier in the day about where someone charged with a violent felony who does not need to be in jail could go and all of the current facilities were excluded as options because of the licensing. Zima felt that this was the type of facility the County needs to contract for or build ourselves. Locked facilities are available at Winnebago and Mendota.

Lasee stated that once the DA's office becomes comfortable and learns a little more about a person charges can be modified, however, they are not comfortable doing that without evaluating a person, especially for things like violent felonies such as substantial battery which really may not be all that serious in some cases given the spectrum of substantial battery. He noted that sometimes there are benefits to charging with a felony because it gives a longer time period to get care and more time for the DA's office to evaluate a person. Lasee stated that many times it is not a question of whether someone committed an act, but more of a question of did the mental illness cause this or are they competent to stand trial and where do they go in the interim until they can be evaluated to determine whether or not they need to go to prison. He is a public safety expert and not a mental health expert and he cannot let people out of jail into an unmonitored situation if they have committed a violent act until a mental health professional can evaluate them and say their mental health caused the act and there is a place to provide treatment.

Zima asked if it was the consensus that the facilities we have are underutilized. Pritzl responded that we have capacity right now that is not being used and there are diversion beds that are empty. Zima asked if some modifications could be made to separate a facility to serve both non-violent and violent people. Schubert felt that one of the things that could be looked at is could one facility being doing one thing while

the other facility is doing the other thing. The facilities could then be specialized and licensed appropriately.

Zima asked what the current staff at the mental health center is. Pritzl answered that they have RNs, two psychiatrists that serve the inpatient units, an APNP that comes on the unit and CNAs. Pritzl asked if the psychiatric staff is capable of doing evaluations. Lindner responded that only state doctors from Winnebago or Mendota can do criminal evaluations. Lasee asked why some of our own psychiatrists cannot do the evaluations. He noted that it would not necessarily have to be a full scale competency evaluation or an evaluation for not guilty by mental disease or defect, but more of an evaluation to tell the law enforcement officers, the DA's office and the judges what the options are for the person to be monitored safely. Lindner asked if increasing medical staff at the jail would help. Steffen responded that the jail is a facility that is set up to keep people safe and there is isolation and separation when necessary. People that are self-harming or a danger to themselves or others are put into safety cells, restraint chairs or other things to keep them safe. Lindner asked if more evaluations could be done within the jail if they funded more doctors. Steffen stated that he was not sure how that would work with licensing.

Lasee stated that doing an evaluation is good, but he felt that history and health records also need to be reviewed and he questioned how to go about getting a release to gather that information. He did not feel it was appropriate to rely upon just the information provided by the person as sometimes they are not in the correct state of mind to accurately provide information. Additionally, sometimes when mental illness is used as a crux people will intentionally mislead. It was indicated that the Sheriff's Department is currently working on this with Human Services. With regard to past clinic records Pritzl noted that if they are trying to get those records, a release is necessary. He wanted to know what information he could present to their doctors to let them know what they are looking at as far as having them do some evaluation. He thinks it would be important to relay to the doctors what kind of information they should gather to help make specific decisions. Lasee stated that what he is thinking is having a tool to tell him that a person is not going to be a safety risk and can be treated someplace other than in the jail and then he may hold off on a felony charge and place them in a less restrictive setting and be sure they go through treatment and if all goes well, they may not be charged with the felony. But unless he has a tool that tells him the community is going to be safe in the interim, Lasee is not comfortable doing this. He is looking for some type of risk assessment based on the mental health needs that is a combination of what the mental health needs are and if they can be treated and if they are a safety risk.

Pritzl talked about the decision points he mentioned earlier and felt there is a question as to what an assessment or screen needs to encompass at different points of the process and wondered if we should be looking at tools across the whole range like whether someone should go into diversion or not and should someone be safety planned or not. Lasee agreed with Pritzl and felt that various tools should be used throughout the process to assess and evaluate what should be done. He stated at this time we know what happens up front but then later we stop and just say that that is the course of the person and that is where they are going to stay. Gossage stated that this is a great point and this may be one of the decision points where we need to have someone with Family Services, who the county contracts with, on this board to discuss the options because when law enforcement hands an individual over to Family Services, it is in Family Services' hands and they make the determination at that point and law enforcement is no longer

involved. If Family Services knows that there is diversion capability, they may be able to divert a person instead of having them end up on an EM1 at the CTC.

Lasee stated that if there are five people in the jail that Steffen knows of, there are probably quite a few others that are revolving doors that clearly have mental illness. He referenced one case that has had eight referrals in less than a 12 month period and it is mostly nuisance stuff, but semi-violent misdemeanor things where the person needs to be removed from the situation and the person ends up back in jail with another referral. Lasee felt we need to continue to evaluate those decision points through the process to try to minimize contacts with this type of person. Steffen stated that these individuals are generally compliant and start taking their meds once they get to jail and then start to be stabilized but the issue comes when they get out of jail and go off their meds and it becomes a vicious cycle. Gossage responded that one of the issues Pritzl is working on is getting the collaboration so people can move out of the jail facility into treatment in the community to reduce recidivism and he thought this would be a tremendous benefit. Pritzl added that once these people are connected with a clinician, it is the clinician's job to stick with them and make sure they are getting connected with resources. Pritzl felt if people were engaged and we really work at it, there can be success. Lasee noted that this would not necessarily be fully voluntary; follow-up treatment could be ordered as a condition of bail or to not charge and as a condition of a deferred agreement the person would be ordered to have some follow-up care. Lasee continued that these conditions are quite common and typically include things like the person will not drink and will take prescription medications as directed. Zima noted that these are just words and Lasee agreed but noted that they would not be just words if there was some follow-up after care facility with the ability to report compliance, and then there could be immediate repercussions.

Zima noted that he felt that these issues are solvable without too much effort. He felt that applying money in the right effort was important and he felt that the staff could put together a report of exactly what is needed that could be forwarded to the County Board. He would like to see something on the drawing board for building or contracting for this type of facility so there are more options for the courts and the justice system. He did not feel it was just mental health, but it was addiction treatment as well as addictions lead to an increase in crime. He noted that 80 – 90% of crime you hear on television is related to drug use and abuse and sales and what people do to find a way to feed their habits and Brown County does not really have treatment for this. Pritzl noted that they do have treatment and capacity, but he said the heroin needs to be separated from other treatment. Pritzl noted that right now they are able to get someone in for treatment at the CTC in the outpatient services program within about three weeks. That includes some treatment for substance abuse for opiates, but if you get into medically supported treatment, that is different. Pritzl noted that someone who wants help could present themselves to the CTC for a screening and assessment and then there would be a short wait to start the intensive outpatient program. Weber asked why the wait is three weeks and Pritzl responded that it is numbers/staffing issue. Weber asked if Pritzl should ask for another staff member and Lindner responded that another inpatient doctor and more staff has already been presented to the Board and she also noted that the wait list actually has gone down, but much of this comes down to what is available in the funding. Pritzl noted that they actually had doctor time available for some of these services, but they did not have the clinician time, so he asked for a clinician to get people to the doctor. One of Pritzl's goals for next year is to reduce the wait time by 25% and figure out what can be done in the interim during the wait period.

Steffen reported that detox protocols are being done at the jail for alcohol, heroin, benzos and opiates. Zima spoke anecdotally and stated that he has a constituent that has a son that got mixed up with the law and he had a heroin problem. The constituent was taking her son to Appleton daily for treatment and this addict got in a situation where he went to jail and that is where he dried out. Steffen noted that heroin is a terrible drug with horrible detox. Zima also noted that there have been quite a few heroin deaths in the county. He questioned if there is any marketing going on letting people know that help is available in Brown County. Pritzl stated that we could do better with marketing and admitted that they are not getting the word out. He stated that people connect through 211 or through the Crisis Center, but he felt that things could be marketed better to let people know the CTC is there and can serve them.

Zima asked what happens when someone goes to the Crisis Center. Pritzl responded that part of the process at the Crisis Center is disclosing issues, talking to the crisis counselor and getting referrals for services. Lindner stated that the Crisis Center does tell some people that they can call the CTC for help but she felt that contact information on the website could be better. She also noted that many times when people come for help, they detox but they do not want to be in a long-term outpatient program and they are out a little bit but then end up coming back in. Pritzl stated that there is a basic needs group that talks about this and the fact that they have to constantly be reaching out and accept the fact that people come in for treatment, have set backs and then exit and this can happen many times before there is success. The concept he likes is to meet somewhere where they are at, keep working at it, and have the patience as a system that it is going to take a while to get through.

Weber noted that she is on the Brown County Mental Health Task Force and they are rebuilding the 211 website because most of the doctors and facilities on there are non-profit or MA so they are going to put as many other facilities on there as they can. She did agree that the website is not very user friendly, but noted that they are under contract and until the contract is done they cannot get new software or a better system. When the website is revised, this group is planning on doing some advertising and public forums.

Zima said he is passionate about diverting people out of the jail and doing something to prevent them from getting there in the first place. His big concern is that building a few more pods at the jail is going to dry up so much of Brown County's resources and there will not be money to do anything and the problems are going to compound. Gossage felt that if there is no treatment, this will be cyclical and we will continue to harbor the generations.

Weber asked about the status of asking for a liaison between the jail and the county and Pritzl responded that he has asked for that and he felt that there was good support for that and they are working on how to present it. Gossage felt that would work very well and will provide more information sharing and collaboration and will also hopefully reduce recidivism and increase participation in the outpatient setting and give resources to individuals to let them know where to go for continuing care. Pritzl said the collaboration between mental health and criminal justice is very important and things they have been working on include the liaison concept as well as the information sharing. Information sharing cannot be a barrier to getting people the treatment they need and Pritzl felt the county is on the right track. He noted that there are already a lot of pieces in place, but it is a matter of making all of these pieces work together. He also referenced a day report center as mentioned by Lasee earlier and felt that was a missing piece that

could provide a comprehensive resource for people to go to get treatment and check in and other services and be a constant. He stated that this group seems to have a lot of good ideas and this is a good group, but we have to determine what to do next and what information needs to be gathered to move forward. He said a lot of it is numbers and he wants to be sure that the County is working up to the full capacity that resources allow as people are getting to crisis situations and ending up in places they should not be.

Zima felt that the majority of the Board will step up to the plate on these issues. If there is someone in the group that says we can handle things the way they are, Zima would rather they not be in this group. He felt we need to identify and get help for the population that is using up the community resources and further, the CTC has got to become a more dominant force in solving problems. Zima opined that saying there are not problems or that we just have a minor problem is not accurate. He continued that to a great extent we are talking about prevention and historically, very little money has been put into prevention. This is something that is real and Zima said we need to find the people who need help and encourage them to get it. If the judges have the ability to give people choices, it would be a start. Zima knows that not everyone is going to be a success case, but he felt we can do a heck of a lot better than what is being done right now. Getting people the help they need will relieve the rest of our system in his opinion.

Pritzl stated that not only do we need to do what the group decides that is treatment oriented, we also have to advance an idea that a certain percent of whatever is being spent on treatment should also be set aside for prevention. If we do not start working on prevention we will continue to do treatment and the cycle will keep going. A bold commitment of setting aside a special percentage earmarked for prevention would send a strong message that the county wants to fund a full continuum of care. Zima said he thinks that the general population does not know where to go for help. Gossage noted that the State has recently done a number of PSAs regarding heroin overdoses and prescription drug overdoses. Lasee agreed that there has been a lot of discussion on this, but felt that the concrete "we can deliver you treatment and here's how it is delivered" is the message that is getting lost. When people find themselves in crisis, they need immediate help, not help in three weeks and this is typically a population that does not plan ahead for three weeks. He felt the county needs to do a better job of packaging how you get treatment so they know exactly where to get help and how to get it.

Steffen said he thinks of these issues as a tool box and for years there has been a hammer and screwdriver in the toolbox and for years that is what we have used to fix things. What we need is more tools in the tool box to make good assessments and decisions at each point. We need to figure out what tools are needed. Steffen continued that right now everything is individualized and everything needs to come together for success.

Zima said that the time frame is short in light of the fact that the budget will be finalized in November, but he felt that we should come up with a rough amount of money to set aside so we can get going soon. He does not want to see this put off for another year. Pritzl like this idea, but he does not want to throw money at something not knowing what we are doing. It has to be something that makes sense and is based on evidence. Zima said we need a realistically good number to give us the freedom to start making changes. Anything that is not used can be carried over until next year. Weininger asked what the number is going to look like and what will the money be spent on. There are a number of options that need to be

narrowed down to be able to say we believe it will cost "x" to do these specific things. Weininger stated that the numbers should be assigned to some conceptual framework to add to the toolbox. Zima suggested that administrative staff meet with Pritzl and the DA prior to the next meeting so they could come forward with some numbers that could make an impact. Gossage noted that he could put numbers together with regard to the EMP program, but he felt the key component that is missing is Judge Zuidmulder as it is really up to the judges to decide if they will allow diversion. Gossage does not want to speak out of turn, but he thought a great starting point would be mental health court as that is a good place to start getting these people in to the system. He noted that he is not the only law enforcement agency involved in this; there are nine other law enforcement agencies in the County that will be stakeholders in this.

Zima asked Lasee if he felt the judges would be resistant to having another tool in their toolbox. Lasee did not think there would be conflict, but noted that there are eight judges in the county who are elected officials who can do things the way they want to do it. He continued that there is a change through criminal justice to look at more effective, aggressive methods. Lasee felt that as long as the judges are satisfied that there is a safe place or safe alternative they will probably be receptive. There are very few judges in the county who want to punish people just for the sake of punishing people. What they want to do is make sure the community is safe and provide people who need treatment with that treatment they need so if there are tools to accomplish those objectives, Lasee felt the judiciary would support that.

Zima asked if any other counties have this type of diversion. Lasee stated that there are day report centers all over the place. Gossage said that he and Lasee and the County Executive went to Outagamie County to look at their day report center and noted that there are many day report centers. Zima felt the niche missing is a locked diversion facility and a day report center is not a lockdown type facility. Pritzl asked Zima if what he is suggesting when he refers to a locked facility, if he is suggesting a facility that is an alternative to jail for people with mental health issues that is locked and secured. Zima said that that is one thing we need and Pritzl responded that he is not sure that we can do that legally. Lindner added that diversion or Bay Haven are not locked, so a person could be diverted there but if the person wants to walk out, they can and then the police would need to be called to get the person back if they are there as a condition of bail.

Lasee stated that he would like to see a facility where people could go for a little more hands on monitoring in a better environment that is healthier. He did not think it necessarily needs to be locked because they can be placed there on court order. Lindner said that a locked facility is a whole different set of rules because constitutional rights would be taken away if they are locked but people could be ordered to an unlocked facility where the person would be either there or jail. Pritzl said this would be looking at using and staffing the CTC differently for this different population we are discussing. Lindner stated that the current facility can take some people, depending on the charges and whether they are safe and there are licensing issues with the CBRF. She stated that she would not turn down money for mental health resources but also noted that the case managers in outpatient have very high caseloads so if we are talking about taking more people in more facilities, we would also need funding for case managers to watch the people.

Zima would like Corporation Counsel, the Sheriff, DA and Human Services to come back to the next meeting with their biggest need at this time along with a number with it and also what it would take to have the facilities that we feel are important. Zima felt that if this group comes before the Board as a group, the County Board will listen as they want to solve problems to avoid building another jail pod. Gossage stated that the jail is currently at 93% capacity and there are 103 people out on the EMP program. Zima was pleased with the Sheriff for keeping the numbers down at the jail and Zima knows that he does everything he can to keep it from being overloaded, but he would rather see money spent on treatment rather than building additional jail pods. Gossage noted that when a person is incarcerated they are the Sheriff's person, but if the person is out on a condition of bond the question sometimes becomes who oversees the monitoring as it would not technically fall under the jail role and a determination would have to be made as to who will monitor these people. Options would be having a private company do it, require the person to pay for it which would have to be upfront or a day report center. He noted that many of the individuals this affects do not have the ability to pay upfront. If there was a day report center, the employees at the day report center would be monitoring that the people show up and take their meds and if they do not, the court would be advised. These people would not have a bracelet. Gossage noted that they could have a contracted service watching individuals who are at risk through the diversion program and it would just be a matter of budgeting for it. Gossage did not know how tangible of numbers he could get as he does not know how many people we're talking about diverting. Pritzl felt this is where targets need to be set and we have to come up with some shared goals or outcomes and then a sense of how many people we want to serve. In addition to Zima's request of coming with ideas, Pritzl felt that we should look at what we want to achieve to see if everything is coming together as it has to be a shared vision and purpose. Hoyer added that it could be looked at on a person by person basis, such as how much it would cost for a person to be in drug court, how much it would cost for the person to be in diversion, etc.

Lasee felt it was important to remember that there are certain areas where a savings will not be recognized until they get to certain numbers. For example, he needs all of the prosecutors he has unless they drop 250 – 300 cases from the caseload. If the caseload was 250 – 300 cases less, he may be able to save money on prosecutors and staff. Unless certain goals and outcomes are met in some areas, savings will not be realized to offset the expense.

Gossage added that a large component of this is what Pritzl has already done by putting the liaison position in his budget as this will probably have the best impact for those individuals being released from the jail and going back into the community and not going back into the jail. He felt that there would be a lot of cost savings here.

Lindner stated that each case manager currently has more than 30 cases. Pritzl stated that the turnover in that area is pretty low but added that he does not have any physical space to add staff.

Zima asked Gossage what percent of the jail population could be diverted over the next couple of years. Gossage would need to do additional research to see who may be eligible for diversion and whether the judges would allow the diversion. Steffen stated that just because someone is mentally ill does not mean that they did not do the criminal act and did not intend to do the criminal act. It would be nice to say that

everyone with mental illness could be diverted but there is a difficulty there as some of them have committed significant acts.

Zima noted that up to a third of the jail population has some extent of mental illness and asked how many of those are not serious criminals. Gossage indicated that there are currently five that definitely need to spend time in jail and there is a lot of energy and resources spent on these people. The problem with mental health issues is that they ebb and flow. If someone does not take their medications, they can go from being very complaint and easy to deal with to someone who is totally off the wall and difficult. They have no way of knowing what will trigger a person and send them into an episode. Zima asked about recidivism rates and Steffen responded that tracking recidivism is difficult in a county jail because everybody is mobile and people can be at a jail in any other area.

Zima felt there is a great opportunity to get something started in the next 4 - 6 months and hopefully within a year or so we could build a facility that meets the needs. Gossage stated that if the jail population were reduced by 30 inmates he would be able to close kilo pod, which is a drain because it requires 24/7 coverage. It was originally built for juvenile problem inmates and they do not have the need for that at this time, but they are having to divert inmates into that pod which then has to be staffed 24/7. Zima stated that reducing the population by 30 does not seem to be a difficult goal and he would like to see the figures as to what the savings would be for that. He felt that anything that can be done to keep pressure off the jail would be useful. Gossage warned that the classifications differ and he cannot just say he has 150 beds and can hold 150 inmates. Steffen stated that they go through classification all the time. They go through the booking forms which look at suicide needs, psychological needs. The problem is that the self-reporting people assert that they have mental health issues that do not. Pritzl added that they have people go into the jail and then go to Nicolet and become stable and then they have to go back to the jail where the cycle starts again. Steffen stated that although people are returned to the jail when they are stable, there are many that are not stable. Pritzl noted that people cannot stay indefinitely at any psych hospital. The step down is great, but then people come and say they do not need to be there anymore, but they cannot be released because there is the criminal issue pending so it ends up being circular. Pritzl noted that the jail cannot mandate someone to take medications. Weber asked about the three point petition and Lindner responded that that is similar to an EM1 in that it starts the commitment process. A medication order could be given to force medication, but some of the medications are not injectable and there is no real way to force oral medications. Steffen reminded that each individual has different needs and requirements. Pritzl stated that we really have to get to the more serious and persistent situations which could be anything from adjustment disorder, bipolar and major depression. Steffen stated that there are also behavior disorders which are not really mental health disorders but are still problematic. Pritzl stated that there is a lot that can be present that does not fall under what we are trying to address. There are people who have a significant mental health issue plus a significant functioning issue that if not properly treated will keep coming back time and time again and these are the people who we really need to catch. Steffen agreed and stated that there are two groups - one that we hope can be diverted from jail based on risk assessments, but also the very difficult problematic mentally ill.

Zima said he will use the same issue on the next agenda and he would ask that the Sheriff's Department, Corporation Counsel, Human Services and the DA's office have at least one joint meeting before the next

meeting of this group in which they bring their realistic initial approaches of what the most immediate needs are and try to put a figure to those needs so we can take a decent stab at doing something in the coming year. Zima believed that there is a large group of people on the County Board who understand how important this is. Zima stated this ad hoc committee is made up of persuasive, intelligent people that the Board will listen too. Hoyer added that he also felt the Board finds this a serious situation and he felt that there would be support for these initiatives.

Weininger indicated that he has recently reached out to Representative Nygren who is very interested in this group and what comes from it. Zima felt that there are many counties in the state that are dealing with these same problems. Weininger continued that there were some dollars set aside in this budget to look at some issues. This was done last year also but it was hard to get a number on it because the cost was not known.

Zima stated that these problems with mental health span across all walks of people and he is pleased with this initial meeting and is looking forward to hearing more reports at the next meeting.

3. Such other matters as authorized by law. None.

Motion made by Erik Hoyer, seconded by John Gossage to adjourn at 8:20 pm. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Therese Giannunzio
Recording Secretary

PROCEEDINGS OF THE AD HOC
MENTAL HEALTH TREATMENT COMMITTEE

Pursuant to Section 19.84, Wis. Stats., notice is hereby given to the public that an Ad Hoc Committee of the County Board of Supervisors met regarding Mental Health Treatment on Thursday, October 15, 2015 at 4:00 pm in the 1st Floor Conference Room, Sophie Beaumont Building, 111 N. Jefferson Street, Green Bay, Wisconsin.

Present: Chair Zima, Vice Chair Hoyer, Erik Pritzl, Ian Agar, Rebecca Lindner, Cheryl Weber, Judge Zuidmulder, Dave Lasee, John Gossage, Chad Weininger, Luke Schubert

I. Call meeting to order.

The meeting was called to order by Chair Guy Zima at 4:02 pm.

II. Approve/modify agenda.

Motion made by Supervisor Hoyer, seconded by Dave Lasee to approve the agenda. Vote taken. MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of September 24, 2015.

Motion made by Erik Pritzl, seconded by Supervisor Hoyer to hold approval of the September 24, 2015 meetings until the next meeting. Vote taken. MOTION CARRIED UNANIMOUSLY

- 1. Discussion, review and possible action: Request that Brown County review its past and present mental health services and develop a more comprehensive plan to treat both short and long-term mental health patients including but not limited to 1) alcohol and drug abuse detox and treatment; and 2) children, adolescent and adult mental health treatment.**
- 2. Discussion, review and possible action: Request that the Human Services Director and Brown County Sheriff work together to develop a plan to provide a treatment plan for prisoners who presently make up a third of our jail population.**

It should be noted that both of the above Items were taken together.

Chair Guy Zima noted that the agenda for this meeting is the same as the last meeting and it was his understanding that some of the parties have met since the last meeting to come up with options.

Luke Schubert joined the meeting at 4:04 pm.

Zima continued that he has heard a lot of positive feedback from Supervisors on this ad hoc committee and senses that the County Board will do the best they can to accommodate any positive ideas generated from this committee. He said this committee has a long range view as well as a short range view and he recalled at the last meeting that the departments all talked about the conflicts in the current system and how these conflicts can be resolved.

Chad Weininger joined the meeting at 4:06 pm.

Pritzl spoke about what Human Services thinks they can bring as far as solutions and noted that Ian Agar is in attendance at this meeting. Agar is in charge of adult behavioral health so there is representation from the

outpatient adult behavior health side as well as the residential units through Luke Schubert. Pritzl referenced an e-mail he sent out recently regarding sequential intercept mapping, which is not something his department does, but he felt is very in line with the last discussion in terms of how to construct a system to respond appropriately to situations. This is an exercise that communities have gone through that is recognized as evidence based in getting to the outcomes this committee is trying to get to. Pritzl thought if we could start the process to bring someone in to facilitate this it would be very helpful. He noted that Milwaukee County has just done this and they brought in Policy Research Associates to assist them in improving their system.

Pritzl continued that from the Human Services side, he still looks at the fact that they have a residential group of units that is not utilized to the fullest capacity. Schubert has been looking at changing certifications to have different populations in and get answers as to what mixing can be done with the populations. Pritzl said they are looking at two different things at once. They are looking at the mental health crisis stabilization unit and they are also looking at substance abuse because that is another issue. Human Services is looking at what can be done to allow clients to move between different resources, such as from jail to the Human Services facilities which then get into how the criminal justice system allows the movement to occur. He felt that if they can get to a point where the Human Services facilities play a bigger role in the transition, seeing if there is a way to do it safely and with the best needs of the person in mind, and if the capacity is being used, they can look to the next step. Right now there are resources not being used and Pritzl wants to use those resources. At this time the population and system barriers are being identified and Pritzl felt they also need to be mindful that there are a lot assessment pieces that need to be straightened out. He continued that if approval is granted for a person to move through the system, we can see if it works and then a determination can be made if the facilities need to be increased. At this point Pritzl felt we are looking at the right facility, but it is a matter of how to get rid of the barriers to movement.

Zima noted that often the District Attorney struggles to find something to do with people who come through the system with mental health needs. Judge Zuidmulder added that all the data tells us is that 80% of the people that come into the criminal justice system have dual diagnoses consisting of drug and alcohol abuse issues and mental health problems. This is generally accepted and the questions that this group needs to answer is how to better address those populations with the mental health and alcohol abuse services that Human Services has rather than using the jail and the courts as a dumping grounds. He noted that these people are coming into court, but the courts do not have the tools to make a difference. Judge Zuidmulder provided the group with a handout, a copy of which is attached, with regard to the treatment courts. One of the critical areas that he felt this committee is talking about and is consistent with is how to get people out of the jail and transition them into a treatment court to identify their needs. He felt that part of what the mental health court is confronted with is that they have people who need to have an evaluation and need to be on their meds and need to be out in the community. The jail is not the place to do this and what Judge Zuidmulder is throwing out is that whatever is put together, he wants this group to think about as a piece of that that something be designed that would be available at the CTC so when there are people who are relapsing or are coming out of the jail and accepted into treatment court, that there is a transitional place for them to go. He felt that many of the failures we have are people that are released from the jail without any place to put them. Zima advised that this was covered extensively at the last meeting and felt that the entire committee was clued into this. He noted that Judge Zuidmulder is a valuable part of this committee and that discussions centered around utilizing the CTC better, but felt that this is just the tip of the iceberg.

Pritzl noted that there are 15 beds at the CBRF that can be utilized and the average daily population in September was 3. He continued that the 3 beds were crisis mental health stabilization beds and noted that there were 12 beds that were not used. Zima responded that there are a lot more than 12 people who need help and he understood that there are limits as to what populations can be put together and things like that but there needs to be transitional facilities available for each type of problem the community has.

Zima continued that sometimes the Sheriff's Department drives around for hours with people in the back of their squads because they do not know what to do with them. Years ago people were brought to the Mental Health Center but this changed under the Kelso administration. Judge Zuidmulder asked if the conversation at the last meeting was that we recognize we need a detox center and other things and we are trying to get our hands around what the cost would be. Zima responded that the committee wants to see what can be done on a short-term basis to make some positive impact and then work on building a model over the next year to absorb a larger portion of the people currently in jail.

Director of Administration Chad Weininger stated that some of the things that were discussed were a day report center, as well as CBRFs as a place to go and contract out with. In-house treatment was also discussed with the beds that Pritzl mentioned earlier, but Weininger noted that licensing would have to be looked into. He also noted that the Sheriff has spearheaded that proper treatment is being given at the jail, and when they step out of the jail, that is when the Human Services team would step in with resources to help reduce the causes of what lands them back in jail. These items are addressed in the 2016 budget and Weininger noted that Zima is also looking at a day report center for the 2016 budget. He noted that one of the discussion points from last time is if a judge would be willing to take people who are charged with a crime and utilizing a CBRF or electronic monitoring device or day reporting center as an alternative to putting them in jail. Judge Zuidmulder responded that the court has authority over two areas. First is bond and he could say that as a condition of bond a person needs to be in something like a CBRF and do specific things and if they do not, they would go to jail. Then there is the post-conviction part and he would have the tools to withhold sentence and put someone on probation with conditions such as being in a CBRF and taking medications. Once someone is in the criminal justice system, the judges immediately have opportunities when they are initially charged that the bail could be designed to have conditions and if they are convicted, there could also be conditions during the probationary period. Judge Zuidmulder continued that if the judges had a recommendation as to what a person needs, and we have to realize that most rational people, assuming they got stabilized, if given the choice of doing what the judge tells them to do or going to jail, that 99.9% of them will follow the directions of the judge.

Weininger asked if the costs for a day report center are known and stated that it would probably have to be RFP'd out. Sheriff Gossage stated that he does not know whose budget this would fall under. Judge Zuidmulder added that he was very impressed with Supervisor Zima at the Human Services Committee meeting in September when these problems were discussed. He has been in government a little longer than Zima and he wished to share that because of the way fiscal management goes, a budget is established which is good for the next year, and he would like to think about whether anyone would have a desire to get a number together of what the programs might cost to ask the county to create that number subject to this committee giving a plan and having approval of the money being spent according to the plan. He felt that if we can get a number together and explain to the County Board that they are not okaying the actual expenditures, but would be setting the money aside and if this committee can come up with programs and explain how the money will be spent, and the committee agrees, then there could be a separate resolution saying the money can be spent. He

fears that there will be some nit picking stuff that will get done, but in January, February or March we will be able to see the totality of what we are trying to accomplish, but by the time we put together a nuts and bolts program, we would have to wait another year to get the funding.

Pritzl felt that this was the time to make the case, even though all of the programming is not build yet. Zima did not want to RFP things to death and felt that this committee needs to come up with some kind of figure for the things that are needed to expand what is already in place to accommodate more people. This could then be brought before the County Board at the budget hearing which is only a few weeks away. Zima felt that the details could be worked out, but he would at least like to let the Board know what this group wants to accomplish and hopefully the Board can do something yet this year to get the needs advanced in the first quarter of next year. He noted that long range there needs to be a facility. Lasee noted that a new facility may or may not be needed. He said that we need a place for detox and also a place for people who are in drug court or mental health court to go on a transitional basis to avoid expensive inpatient treatment and avoid jail; a place where people can go for stable housing in after-care situations and while they are on probation. Those are the things Lasee felt are needed in terms of residences. Zima stated that often after people are detoxed it is determined that there are some mental health problems as well and it needs to be sorted out where the people are misbehaving in society and where they are misbehaving partially because of mental health issues and what can be done to slow down the population growth of people in jail who do not belong there due to mental health issues. He said that the construction of a two pod facility at the jail is estimated at \$30 million dollars, not including staffing. Zima continued that there were provisions to do some helpful things at the jail, but the jail is not a treatment center and they cooperate because they need to and want to, but there has to be someplace to put these people. Many of these people have multiple problems.

Pritzl said that he and Luke Schubert have been looking at another model which is changing the current certification to do a transitional residential treatment model. There would not be a lot of staffing change involved and they have the beds, so it would only need some tweaking. Schubert has been really digging into this and looking at other models and other counties. Schubert stated he did not feel it would be a significant process, but they would have to be certified under Chapter 75.14. He stated that they could still be certified as a CBRF, but they would have to get additional programming certification and some programming elements. From a staffing standpoint, they would need an AODA counselor and some peer support hours. Pritzl stated that peer support is provided by someone who has had addiction problems in the past but have gone through the recovery process and are trained as peer support specialists and they help other people recover. There is a small amount of money set aside in the 2016 Human Services budget to support training for peer specialists.

Weininger asked what the price tag would be for an AODA counselor and Pritzl felt it would be about \$70,000 including benefits. Assistant Corporation Counsel Rebecca Lindner asked if there would be a need for additional doctor time, but Pritzl felt that this could be done through a doctor that is already there. Weininger asked what the cost for the certification would be. Pritzl has asked Facilities for an estimate to separate the facility and noted that there would also be a piece that needs to be changed to provide common areas in both units. He did not think the estimate would be that high but also noted that the footprint of the building does not lend itself to much expansion. Weininger noted that an estimate of \$300,000, including staff looks like a good figure. Pritzl said if it is kept the way it is now with 15 beds, it can be interchangeable if populations can be mixed. If it was separated, there would be a 7 bed unit and an 8 bed unit. Weininger noted that there would be a loss of revenue if the facility was split.

Judge Zuidmulder said he felt that the members of the County Board have the best interests of the community in mind. His concern is that this committee is credible with them. He does not want to see numbers thrown together and presented to the Board. He felt that everyone understands the needs and are willing to go the distance. A number should be put together and presented to the Board with the understanding that this committee is in the stage of debating this and putting it all together and then can come back to the Board with a figure that everyone agrees on to give the Board a second chance to say to go ahead and spend the money. Judge Zuidmulder does not want to see something thrown together and have money spent and then flop because we did not think it through well enough.

Pritzl felt it was important to understand that one of the assumptions being made is that people want to be placed somewhere, but this is a large unknown. He said there are some people who will be ordered to move to a facility, but there are a bunch of others entangled in the criminal justice system that do not want to engage in treatment. Zima did not think there were people who would say "no thanks" to treatment however Pritzl disagreed and said that some may choose to stay in jail instead of move to treatment.

Lasee stated that they are not dealing with a huge number of people in the jail that they absolutely need to have out in a secure facility or residential treatment. There are a lot of people that need to be in jail, despite their mental health issues, but there are a lot of people that could be served in a better way before they even get to jail. These people should be served where they are at instead of picking them up and driving around for a number of hours and then dropping them off at the jail. If there are other resources available, systemic changes could be made to deal with people where they are at before they are picked up. Law enforcement picking these people up only exacerbates the problems and issues that are manifested because of the police contact could potentially be avoided if services were delivered in a different way. Lasee agreed that there is a need for housing and felt that the number of people needing this would be somewhere in the area of 15 – 25 over the course of the year. The number of scenarios they encounter where they really, really need another type of residential placement for an individual is relatively small compared to the number of people that touch the system as a whole. Lasee felt there is certainly a need for a day report center to manage people pre-conviction when they are out on bond in the detox arena.

Pritzl mentioned the sequential intercept mapping again and said that it is a recognized model that communities use to figure out how to deal with people at different points in the system and how to interrupt the cycle and what can be done systemically to change. The mapping would help provide information to figure all of these things out and Pritzl felt that it would be worth the money, although he does not know what the cost would be. He stated that this would be about walking through the system and identifying the gaps and then focusing on those gaps. Lasee stated that the system mapping prevents having to reinvent the wheel because they come back and advise of different ideas of things that are working well in other areas. Pritzl noted that Brown County has some unique pieces to the system and mapping would help determine how to use the pieces that are already in place and work well and build what is missing and then make the whole system work better overall.

Zima is looking down the road at what needs to be done to accomplish what this group wants to accomplish. Lindner felt there were two separate things. The criminal transitional placements and she noted that there are certain felony charges or non-violent charges that prevent some placement options. Then there is the AODA residential care. She toured Dane County's AODA residential care facility which offers substance abuse detox, crisis stabilization, case management, housing services for single adults and housing services for families. Dane

County has some locked beds and some unlocked. Lindner noted that Dane spends about \$1 million dollars a year, but also noted that they have a much larger population than Brown County. She opined that AODA residential care/mental health stabilization and criminal transitional placement are the areas that need to be worked on. She noted that the case workers have heavy caseloads, but there are AODA case managers that can do intensive outpatient case managing, but she felt that if someone goes through a detox procedure and then can be set up with a couple weeks of intensive outpatient care, there is still a gap in that Brown County does not have a residential day treatment or care facility where someone can go to transition into monitored living for a period to stay sober and clean and have support. Pritzl noted that that is exactly what he is trying to explore to hit the gap.

Judge Zuidmulder felt the needs here are not just needs in Brown County, but are needs within the entire judicial district. He noted that there is a heroin court in Marinette that has a significant grant and there is also \$600,000 set aside by the state for the eight judicial districts. If the money is not being used by those counties, the funds can then be used by contiguous counties. Zuidmulder noted that the closest detox center is in Chippewa Falls and he has had conversations with the people managing this saying if there was a detox center in Brown County, it would be highly likely that they would be using our facility. It was noted that Medicare allows \$725 per day to be paid for detox. Judge Zuidmulder continued that he has had conversations with his colleague in Marinette and he is enthusiastic about having a facility much closer than Chippewa Falls. It was noted that the funds were targeted for more rural populations, but the rural counties are too small to populate the facilities. Judge Zuidmulder said that the grant includes language that if the population in those counties is not sufficient to utilize the services then contiguous counties could and he felt this may be a vehicle to get some of the program here in Brown County.

Zima asked what we need to ask the County Board for to utilize the facilities we already have. Weininger noted that if the Board is uncomfortable with setting a fixed number, there would still be the possibility for the Board to change the payee mix on the other CBRF and that money could be used to fund the cost of treatment. Pritzl did not think this would produce enough money and noted that the total spent for mental health services is about \$12.8 million dollars annually. Zima stated that what the County has on the levy for mental health services is a much smaller number and he felt it was time to look at a bigger number, especially since the County population is growing. He felt that the County has been pathetically low in funding anything for prevention and it is time to do something to keep people coming into these very expensive systems. Zima thinks we have to be more realistic, no matter what the number is. He would like to face the problem and determine what we want to do for the community as he sees the community festering and he wants to fix it.

Hoyer felt that putting together a plan in the short-term in the next few weeks is unlikely. What he would like to see is the creation of some sort of escrow-type account that is budgeted for 2016, but this committee would not necessarily make specific decisions as to how to actually spend the money until more research is done. Hoyer felt everyone was on the same page in wanting the same things, but he did not think this is a system that can handle a quick fix. Zima said that these services used to be available but were cut back. There is a facility sitting there, we just have to find a way to get it registered properly. What we can do this year is find out what the maximum we can do is. Judge Zuidmulder stated that what he finds so credible is that everyone at this meeting is on the same page and he felt that the vast majority of the Board is on the same page as well. He would like to see what we can agree on quickly and then have money set aside to do it, but felt that there needs to be a larger picture and another opportunity to see how it all comes together and then go to the Board with a concrete

proposal and why we are satisfied the program will work. Zima felt that we could go to the Board with a proposal as to how to utilize the facility we already have and then come back with a much bigger preventative system for next year. Judge Zuidmulder felt what we need to ask the Board to put the money aside, but it does not have to be spent. The committee will come back and give the Board what is needed. Zima stated that we should bring forward the short-term model and then let the Board know how we want to expand it so money can be set aside. If the money is not spent it can be returned.

At this point Zima had to leave the meeting and he put Judge Zuidmulder in charge.

Lindner asked Sheriff Gossage if he had any figures for EMP monitoring. Gossage responded that he looked at this with one vendor and got a price for about 80 inmates. The rate was about \$6.56 which would be for the GPS with remote breath for those that have an AODA component. The equipment rental is \$61,000 per year. Looking at a civilian employee to do the monitoring would be about \$125,000 bringing the total to about \$181,000 annually. Lindner added that she felt, based on Dane County's contract and what Schubert said for residential transitional AODA detox treatment, a good figure is \$300,000, including staff. She felt that realistically those two systems could be put in place for \$500,000.

Lasee noted that he was a little hesitant on the electronic monitoring as he did not know if the 2016 budget would support this if it was going to be used more comprehensively in the pretrial period. He thought maybe we should look at this more for 2017 and then have a structure in place where the \$185,000 is offset by jail savings. Gossage noted that there are 8 circuit court judges and some of them may not be so open to the fact of putting someone on a bracelet. Judge Zuidmulder responded that that was a different conversation and he believes we are talking about people with mental health or alcohol abuse problems. He said the population we are talking about are those that are in jail but are charged with a crime but have an alcohol and mental health issue. To him the question is not that he is going to put them on monitoring, but he will order that they can be released from jail with the condition that they go to a facility and the bond conditions will be given to the facility. That is how he sees this working when the jail calls and says they have someone that really should not be in the jail. Gossage responded that he is looking at the electronic monitoring as an alternative to incarceration, before people even go to the jail, but noted that that needs judicial oversight.

Cheryl Weber stated that everyone at the last meeting said that what is needed is diversion and alternate placing. She recalled hearing a police officer in the past saying that often times they pick up people and do not want to put them in jail, but do not have any place else to put them and she thought that that was more what we were looking for. Pritzl responded that the question there is that law enforcement wants to take them somewhere or that the person wants to go somewhere because those are two fundamentally different things. The only two situations that permit people going without a choice are either to the hospital or jail under either a commitment or an arrest.

Lasee noted that if the current structure is remodeled to potentially deliver services to people where they are at, some of the people may not need to go anywhere. Sometimes if people act up a little but, they are taken to the Crisis Center and that just makes the situation worse and results in all sorts of additional problems. He said if there was a better mechanism to deliver services to people where they are at, there may be the possibility of avoiding taking them anywhere. Gossage noted that Colorado uses a model where they respond to calls with a crisis worker, a police officer and an EMS and he will provide this information to the committee. They do the

services right there and if there is no threat the officer leaves. Pritzl noted that Brown County is mobile crisis certified, but there is a cost and a capacity issue. One of the questions is the belief of once you intervene, do you have to take the person somewhere and people are being picked up and brought to the Crisis Center, but in reality, there is no legal requirement that says you have to take them to the Crisis Center and there is no mandatory arrest requirement. Lasee noted that we need to do less of taking people into custody if there is an alternative. Once a person is taken into custody, that's where the costs are incurred and then the County is responsible for those people because they took them into custody. Whereas if the people are treated where they are, the costs go down and the liability goes down and Lasee assumed that the success rate goes up as well. Weber asked why this is not being done. Pritzl responded that Crisis Center will probably say that they do not have the resources to go out on calls as much as they would like to. Mobile crisis is not as available as much as it needs to be. Adding staff for more crisis mobility may be something to look at. Behavioral Health Manager Ian Agar agreed that the Crisis Center would probably say that they do not have the resources to provide significant mobile response. Judge Zuidmulder stated that this is based upon agreeability and his experience is that most of the time people end up in jail because they are not agreeable to being taken elsewhere. He does not have a problem with people who are amenable to be taken somewhere, but the problems he is hearing of are people who are obstinate, hallucinating or whatever or they are totally buzzed up and need to be detoxed. He thinks that this is what the critical need is right now because those are the people that are causing the population issues in jail. If people are half amenable, they do not typically end up in the jail anyway.

Lasee responded that part of that is the response to calls. He noted that there are times when there are calls for people who are upset or out of control, but are not to the point of needing incarceration or confinement. If we can respond to these people in a friendly manner, they may not end up incarcerated or confined. Zuidmulder stated that that is interdiction and this is for the people that we can talk down, and that is only one piece of it. We also have to have transitional residential treatment which will be compelled because they will be in the criminal justice system and will be told that that is what they need to do if they do not want to be in jail. Most people will choose to do exactly what the judge tells them to do to stay out of the jail.

Lasee responded that if these two components would be a good start. The interdiction cost may be \$200,000 to help 100 or 200 people and the transitional living piece may be \$300,000 to help 15 people, but both are definitely needed. Judge Zuidmulder agreed and said that what will develop is a population and numbers that will show who is going where and what the needs are which will put this group in a much better position to talk about the needs. Additionally, from a regional standpoint, this could potentially become a model for other counties with the same issues. Hoyer noted that we need to take some steps to build our way up and he stated there are some long-term ambitions that will draw in others as well as the possibility of revenue from other counties.

Zuidmulder asked what the number would be to increase mobile crisis. Agar noted that they would need at least one and possibly two additional staff. He noted that there are peak hours for this and they could work their staff around that. Weber thought that the Crisis Center had a problem getting people to work there. Agar said that Family Services pays a lot of money to the Crisis Center and dictates how the staff will be paid, etc. The County cannot dictate how Family Services spend their money or how much they pay their counselors; Brown County uses them as a contracted service. Pritzl continued that crisis positions, by nature, are transitional positions. People burn out and also use those positions to go to other positions after being trained as a therapist. Weber noted that this is the first place that people are told to go, but they do not pay their

employees enough to stay there. Judge Zuidmulder asked Agar what price tag he would put on an interdiction program and Agar responded that \$200,000 for mobile crisis would be a ballpark figure.

The detoxification services were discussed next and Pritzl noted that there are two things going on at the same time, mental health and detox. The question seems to be why we cannot just go back to 2012 when detox was provided but Pritzl noted that the system had problems and was not really working in 2012. However after they stopped doing detox in 2012 nothing different was done. What has been happening is that people are detoxing in the Crisis Center lobby, in homes, in jail, in the street, in squad cars, emergency rooms, etc. Pritzl noted that if we really want to look at this, there would need to be money set aside in 2016. He does not know what the number is of people who would need to have detox services. Lindner noted that if someone has insurance and wants to go through detox, there are services available. What is being talking about here are the unfunded people and that is the population that is consuming a lot of resources and getting involved in the system in different ways. Pritzl felt that if we could make progress with this group to reduce the cycle, it would be good. He said that the average length of stay for detox at Bellin is 2 ½ days. He will need to determine what they will require as a rate so he knows what it will cost per day, how many days and how many people. Judge Zuidmulder asked if this was voluntary detox or people that come out of the jail and then he orders into detox. Gossage noted that they get new inmates all hours of the day and they do their best to triage. The problem is the recidivism component that they keep coming back in when they are released on a signature bond. Gossage felt if a judge puts an order in place, it would help with some of the mental health AODA issues and give a person some of the tools they need to be successful upon getting out into the community which would help the recidivism rate. Judge Zuidmulder stated that under the law, if you are arrested you have to be brought before a judicial officer within 48 hours. If there was something in place and the jail was saying that someone needs to be in detox instead of jail, the court commissioner could order as a condition of bond that a person be taken detox and the people at the detox center will be advised to contact the Sheriff's Department if the person is not complaint and the Sheriff will come and get them and bring them back into the jail. If the system were working properly, the person would stay in detox for several days and then come back to court for further proceedings and hopefully they would be in a better place. Pritzl stated that there were funding issues that may need to be looked at because if detox is a condition of release, he is not sure that anyone will pay as it would be deemed a court-ordered service which mean it was not medically necessary for insurance purposes.

A dollar figure for detoxification was discussed. Pritzl did not have a good number for detox but it was notes that Outagamie County had \$260,000 per year for detox. Judge Zuidmulder felt that the \$260,000 should be used as Outagamie County's demographics are similar to Brown County's. He felt the whole idea was that we are building this number, but there is no intention to spend the money until this committee puts everything together and comes back to the Board and the Board gets a shot at it and so does the County Executive. Pritzl recalled that Human Services submitted detox as one of the top three unfunded initiatives for 2016 and put a price tag of \$1.1 million dollars on it, but that was for a stand-alone 6 – 8 bed facility. Judge Zuidmulder noted that the original number was aimed at a much smaller need than what we are talking about now. This is a far better use of the community's dollars because it will impact far more people. Pritzl noted that having detox services would move the county ahead a lot, no doubt about it. He noted that everyone here is committed to look at this and in the past he is not so sure that there was flexibility as to what the CTC could offer, but now it looks like if there are community needs and there are beds available we have to figure out how to make it work. Nothing bothers him more than having unused beds while there are people out there whose needs are not being met.

Mental Health Treatment Committee
October 15, 2015

Lasee brought up the idea of a day report center and said that he still felt it was a glaring need. Judge Zuidmulder said that he would agree with that if the day report center was a place where medications could be dispensed. Lasee stated a day report center would be able to dispense medications, do drug tests and provide other services by a case manager. Pritzl stated that he would also like to see behavioral health available as well as economic support at a day report center. Judge Zuidmulder noted that the other thing that should be discussed is the Huber people and whether the Huber Center could be shut down if a day report center was available. Gossage stated that he looked at that model several years ago, especially in light of the highly technical EMP monitoring now available. He did feel, however, that there were some inmates that do not fit the EMP program scenario because they are homeless so they have to go back to the jail. If he could alleviate one of the floors of the Huber Center, it would still afford the county to have treatment downtown, accessible and on the bus line and close to the courthouse. Pritzl asked Lasee if he could put a number to a day report center. Judge Zuidmulder stated that the number should be in there and if we can come up with it and get it operating this summer, we should do that because if it is not included and there is a need, it would be another 18 months before we have a chance to get anything done. A figure of \$350,000 was projected for a day report center.

Pritzl brought up the sequential intercept mapping and Gossage noted that when this was done with Criminal Justice Coordinating Board the amount was in the neighborhood of \$7,500.

It was concluded that the recommendation that would come out of this group was that the total amount needed for these initiatives is \$1,150,000 broken down as follows:

Service:	Description:	Amount:
Transitional Residential Treatment	Changes to the certification and regulation at the Community Treatment Center would allow us to offer services to populations with substance use needs. The service provides substance abuse treatment, immediate access to peer support through the environment and case management in the areas of personal health and hygiene, community socialization, job readiness, problem resolution counseling, housekeeping and financial planning.	\$300,000
Mobile Crisis Capacity Increase	Increased staffing to provide more onsite, in-person interventions for individuals experiencing a mental health crisis.	\$200,000
Detoxification Services	Funding for medically managed inpatient detoxification services in a hospital setting.	\$300,000
Day Report Center	Create a Day Report Center to serve as an alternative to incarceration for non-violent adult offenders. This would include monitoring, behavioral health screening and counseling, vocational coaching and employment support.	\$350,000
Total:		\$1,150,000

Zuidmulder would like this packaged that these are all estimates of things we would need, but that when we actually have the program designed and the staffing costs, then we will return the Board and ask for the authority to spend the money. Pritzl asked if this needs to go to the full Board or if the Committee could release the funds and Hoyer responded that it would have to be approved by the full board. Zuidmulder felt that the

**PROCEEDINGS OF THE BROWN COUNTY
VETERANS' RECOGNITION SUBCOMMITTEE**

Pursuant to Section 19.84, Wis. Stats., a regular meeting of the **Brown County Veterans' Recognition Subcommittee** was held on Tuesday, October 20, 2015 at 4:30 p.m., in Room 201 of the Northern Building, 305 E. Walnut Street, Green Bay, Wisconsin.

PRESENT: Chair Bernie Erickson, Ed Koslowski, Delores Pierce, Duane Pierce, Jim Haskins, Louise Dahlke, Jerry Polus, Rosemary Desisles, Joe Witkowski, Tracy Rosinski

EXCUSED: Lynn Geiser, Carl Soderberg

****Running Total of Veterans' Certificates: 1725**

1. **Call Meeting to Order.**

The meeting was called to order by Chair Bernie Erickson at 4:30 pm.

2. **Invocation.**

3. **Approve/Modify Agenda.**

Motion made by Jim Haskins, seconded by Duane Pierce to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

4. **Approve/Modify Minutes of September 15, 2015.**

Duane Pierce wished to make a correction under his report in Item 10 with regard to the flag burning ceremony. He indicated that this should be reflected as a flag retirement ceremony and explained that a flag retirement ceremony is done with honors and respect while a flag burning is done by protestors. This clarification will be made in the minutes, however, it should be noted that the original report of this event referred to it as a flag burning ceremony as reflected on the recording.

Motion made by Duane Pierce, seconded by Joe Witkowski to approve as amended. Vote taken. MOTION CARRIED UNANIMOUSLY

5. **Budget Status Financial Report through September 30, 2015.**

Erickson explained how to read this financial graph and noted that \$1,000 for this Subcommittee was approved at the most-recent Executive Committee meeting. Tracy Rosinski also noted that Heartland will be forwarding a check to be deposited prior to the end of the year for the band at the Fair.

Motion made by Jim Haskins, seconded by Tracy Rosinski to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

6. **Discussion re: Veterans Day Donation List.**

Rosemary Desisles asked for an update on the calls for donations that Subcommittee members have been making. Updates were given and Desisles asked everyone to finish up their calls so the list of offers could be put together for publication. She also indicated that she had spoken with Dave at the VFW and they discussed the newspaper article. It seems that the problem last year was that the VFW was not mentioned in the article and Dave indicated that this year the VFW will be submitting their own article for publication. Desisles read the article that will appear in the newspaper to the group and indicated that the newspaper will need the final article by the end of next week. Erickson

noted that he has received confirmation from the Neville Public Museum and NEW Zoo that they will extend the same offers they did last year to Veterans. Desisles reiterated that she needs the results of all donation calls as soon as possible to keep things moving on the appropriate timeline.

Witkowski shared that he did not think it was appropriate to list specific donation amounts or items for businesses who donated so as not to make other businesses feel that their donations were not enough.

Desisles reported that Oneida Casino has decided not to give any items for the raffle this year, but instead will be offering \$10 free play coupons. She was thanked by the Subcommittee for her work on the Veterans Day project and this was followed by a round of applause.

7. Report from CVSO Jerry Polus.

CVSO Jerry Polus reported that he received a gift card from Mills Fleet Farm in his office addressed to the VFW Post. He will be sure that this gift card is given to the Post. Additionally, Polus received from US Venture, which used to be Express Convenience Centers, a donation of \$150.00 made out to the Subcommittee. This donation will be used to purchase several gift cards from Express to use as door prizes at the veterans' breakfast.

Polus also reported on the following events going on for Veterans Day.

-Saturday, November 7, 11:00 am to 3:00 pm - Event at the Green Bay Yacht Club for veterans, family members and general public. A ceremony will be held at 11:00 am followed by lunch.

-Sunday, November 8, 10:00 am - Shrine of Our Lady of Good Help in Champion, WI will be holding a special dedication of the St. Michael statue at the grotto; dedication will be held at 10:00 am, followed by the rosary at 10:30 am and Mass honoring veterans at 11:00 am.

-November 11, 10:30 am - Veterans ceremony at Shopko Hall.

-November 14 - Green Bay Gamblers, free admissions for veterans.

Polus concluded his report by saying that Bonnie from his office has retired and has been replaced by Thomas Murphy, an Air Force veteran who is doing well in his new position.

8. Comments from Carl Soderberg.

Carl Soderberg was not able to attend the meeting and therefore there was no report.

9. Report from Committee Members Present (Erickson, Desisles, Haskins, Geiser, Koslowski, Maino, Pierce, Rosinski & Witkowski).

Duane Pierce introduced his guest from Merrill, Pepper, to the Subcommittee. Pepper is a Vietnam Vet.

-Erickson noted that there will be \$1,000 in the budget for 2016 for this Subcommittee and he will also be working with Internal Auditor Dan Process to get a separate donation account set up.

-Desisles did not have anything to add other than what had been discussed earlier with regard to Veterans Day.

-Haskins wished to observe a moment of silence in observance of the death of former Subcommittee member, Don Bettine's wife. Haskins did not have anything else to report.

-Koslowski reported that Operation at Ease recently sponsored a bus trip to Illinois for desert area veterans to see the memorial. There were about seven or eight desert vets from Green Bay that

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participated. Koslowski also noted that the AMVETS Post recently held a food drive for residents of the Green Bay Veterans Manor and 22 bags of food were collected. He indicated that food is an ongoing need for some of the residents at the Manor. Koslowski continued that a national executive committee meeting for AMVETS will be held at the Radisson on November 7 and he was glad to see that national representatives are holding state meetings in Wisconsin.

-Pierce expanded on the ceremony at the Green Bay Yacht Club that Polus spoke of earlier and said that vets who have not attended the ceremony in the past are asked to arrive by 10:00 am to register. Once a veteran is registered, they will receive an invitation to the following year's event. Pierce stated that it is a good event with good food and good people. After the Yacht Club Event, the Pearly Gates will be hosting free lunch for veterans from 11:00 am – 4:00 pm. Additionally, Vietnam Vets 224 will be holding an all-day vigil at the Veterans Memorial behind the Neville Public Museum and he encouraged people to visit. Finally, on November 7 a Carry the Fallen Ruck March will be held from 6:00 am until 6:00 pm. This event will start and end at the Replay Bar across from the Fairgrounds. Following the march there will be a band as well as door prizes.

-Rosinski had an update on the Fallen Comrades Ceremony that was presented by Debra Grassman on September 11. Grassman has been approached by PBS to do a documentary on Fallen Comrade ceremonies and they have asked for footage from the event in Green Bay. Rosinski also noted that she will be available to help at the Veterans Day event on November 11 and she will also be able to bring additional volunteers. Further, Rosinski indicated that Heartland will be doing various pinning events of veterans throughout the community and said that anyone who may be interested in helping at those events can let her know.

-Witkowski noted that the flag at Ryan Funeral Home is being flown in October in honor of Veteran John Cass of the US Navy. The flag at the funeral home is flown in honor of a different veteran each month. Witkowski also shared a story of a veteran he had met recently who appeared to be homeless.

10. **Such Other Matters as Authorized by Law.**

Louise Dahlke said that from reviewing the minutes of the last meeting she noted that a motion was made to hold next year's ceremony at the Fair at the same time as it was held this year. She indicated, however, that the Fair Association had discussed moving the Veterans Ceremony to Sunday and she let the Association know that this Subcommittee was probably not willing to do that. The Fair Association then brought up the idea of moving the Veterans Ceremony up on Saturday to earlier in the day, starting around 10:00 am so that the ceremony would be done by 3:00 which would alleviate the parking problems that exist when the rodeo people start coming in. Dahlke said she will keep this group updated with developments in this regard and it can be discussed in more detail after the first of the year. After discussing this a little further, the Subcommittee felt that moving the ceremony up in the day may be preferable.

11. **Adjourn.**

Motion made by Jim Haskins, seconded by Duane Pierce to adjourn at 5:24 pm. Vote taken.
MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Therese Giannunzio
Recording Secretary

Brown County Human Services

Executive Director's Report to the Human Services Board & Committee

November 12, 2015

Members of the Board/Committee:

The first item to update the Human Services Board on is that the County Board passed the Human Services budget as presented. This budget has many positions and initiatives that will be helpful in improving services and operations as a department. The support of the County Executive and the County Board of the initiatives is greatly appreciated, and we, as a department, look forward to 2016.

In addition to the budget as presented, the County Board supported a significant investment in improving and enhancing mental health and substance abuse services in Brown County. A number of community members spoke in support of this four part initiative. This proposal came out of the meetings of the ad hoc Mental Health Treatment Committee, and support for the proposal came from the Basic Needs Group and the Mental Health Task Force. The proposal includes:

- Transitional Residential Treatment to provide substance abuse treatment, immediate access to peer support through the environment and case management in the areas of personal health and hygiene, community socialization, job readiness, problem resolution counseling, housekeeping and financial planning.
- Increasing mobile crisis capacity to provide more onsite, in-person interventions for individuals experiencing a mental health crisis.
- Detoxification Services to fund medically managed inpatient detoxification services in a hospital setting.
- Creating a Day Report Center to serve as an alternative to incarceration for non-violent adult offenders. This would include monitoring, behavioral health screening and counseling, vocational coaching and employment support.

The County Board further added funding to support training related to the Child Abuse Task Force. Training for the community, and for the department, is a worthwhile investment.

Luke Schubert, the Nursing Home and Hospital Administrator, will take time to review the reports from the Community Treatment Center included in the packet. We continue to see improvements in the census and operations at the Community Treatment Center.

Planning continues for the move of the Health Department to the Sophie Beaumont Building in 2016. A committee and workgroup structure has been established to move the project forward in a way that meets the needs of the public, and the operational needs of the departments involved. Collaboration between the departments is critical to make this a success.

Departmental Openings Summary			
To: Human Services Committee			
From: Department of Human Services			
Position	Vacancy Date	Reason for Leaving	Fill or Hold
Clinical Social Worker	11/2/2015	Resignation	Fill
Social Worker/CM – Adult Protective Services	11/3/2015	Termination	Fill
Social Worker/CM – Child Protection	11/30/15	Resignation	Fill

Respectfully Submitted By:



Erik Pritzl, Executive Director



BROWN COUNTY LEASE AGREEMENT

THIS LEASE ("Lease" or "Agreement") is entered into by and between Brown County, a Wisconsin quasi-municipal corporation (hereinafter called "Lessor"), with its primary offices located at 305 E. Walnut Street Green Bay, Wisconsin 54301, through its Human Services Department, and FAMILY SERVICES OF NORTHEASTERN WISCONSIN, INC. (hereinafter called "Lessee"), located at 300 Crooks Street, Green Bay, Wisconsin 54301. Hereinafter, Lessor and Lessee referred to collectively in the plural as "Parties" and in the singular as "Party".

RECITALS

WHEREAS, Lessee is a public services corporation providing services to families in Northeastern Wisconsin; and,

WHEREAS, Lessee is in need of space to operate and provide said family services, which include a residential treatment facility commonly known as "Our Place;" and,

WHEREAS, Lessor is a quasi-municipal corporation with a Human Services Department, which provides various programs for eligible individuals and families in the community in need of assistance; and,

WHEREAS, Lessor has property located at 1501 N. Irwin Street in the City of Green Bay, Wisconsin, which is suitable for leasing and would be beneficial for the needs of Lessee in the operation of their business; and,

WHEREAS, Lessee desires to lease property from Lessor and Lessor agrees to lease said property to Lessee under the terms and conditions set out under this Agreement.

NOW THEREFORE, in consideration of the rent, agreements and covenants herein contained, the Parties agree as follows:

- 1. Recitals.** The above recitals are true, correct and incorporated herein.
- 2. Leased Premises.**
 - a. Subject to the terms and conditions of this Lease, Lessor does hereby lease to Lessee the following premises located at 1501 N. Irwin Street in the City of Green Bay, in the County of Brown, Wisconsin ("Premises").
 - b. Said Premises contains approximately Six Thousand, seven hundred, fifty-one (6,751) usable square feet, which represents the entirety of the habitable portion of said property.
- 3. Term.**
 - a. The Term of the Lease will be three (3) years commencing January 1, 2016 through December 31, 2019 ("Initial Term").
 - b. At the expiration of the Initial Term, the Lease shall be extended thereafter on a month to month basis, with both Parties possessing the ability to terminate such lease with sixty (60) days' prior written notice to the other Party.
- 4. Rent.** Lessee agrees to pay Lessor as follows:

- a. Three Thousand Dollars (\$3,000.00) per month, for the first twelve (12) months, due and owing on or before the first of each month.
 - b. Thereafter rent may increase annually on January 1 of each and every year succeeding thereafter, in an amount as determined by the annual increase in the June Consumer Price Index for all Urban Wage Earners and Clerical Workers (CPI-W), Midwest Urban Area, not to exceed 3% in any given year. Notice of any increase shall be sent to Lessee no less than thirty (30) days prior to the first of January.
 - c. Lessee shall make rental payments on or before the first of each month to: Brown County Human Services, P.O. Box 22188, Green Bay, Wisconsin 54305-2188.
5. **Termination.** Termination of this agreement is permissible for any reason or no reason upon a sixty (60) day prior written notice by either Party to the other Party of intent to terminate. Upon the termination of this Lease for any reason, the respective rights of the Lessee to the Premises shall terminate, however, indemnification and hold harmless obligations of Lessee under this Lease shall survive the expiration or termination of this Agreement and continue until they are fully satisfied or waived.
6. **Use.** Said Premises are to be used by Lessee for the operation of a residential treatment facility commonly known as "Our Place." Any use inconsistent with this intent shall be grounds for immediate termination of the Lease with written notice given, without need to provide sixty (60) days' notice as required under Section 5 of this Agreement. Such use shall only be amended by explicit, written consent of the Parties signed by their respective authorized representatives.
7. **Property Condition.**
 - a. Lessor warrants that the Premises are in a reasonably safe condition and complies with applicable federal (ADA), state, county and city codes, laws, rules and regulations.
 - b. Lessee understands that it takes possession of the Premises in an "as is" condition. No representations, except such as are endorsed herein, have been made to Lessee respecting the condition of said Premises. Upon termination of this Lease, Lessee shall return said Premises to the Lessor peaceably and quietly and in as good condition as when received, ordinary wear excepted.
8. **Sublet, Assign or Lien.**
 - a. Lessee shall not, directly or indirectly, create, incur, assume or suffer to exist any mortgage, pledge, lien, charge, sublease, encumbrance or claim on or with respect to the Leased Premises, other than those created under this Lease. Lessee shall promptly, at its own expense, take such action as may be necessary duly to discharge or remove any such mortgage, pledge, lien, charge, sublease, encumbrance or claim if the same shall arise at any time. Lessee shall pay, when due, all charges and taxes (local, state, federal or other) which may now or hereinafter be imposed upon the ownership, leasing, rental, possession or use of the Leased Premises. If Lessee fails to pay said charges and taxes when due, Lessor shall have the right, but shall not be obligated, to pay said charges and taxes. If Lessor pays any charges or taxes for which Lessee is responsible or liable under this Lease or otherwise, Lessee shall, upon demand, reimburse Lessor therefore within ten (10) days of written notice from Lessor.
 - b. Lessee shall not do anything which might cause or result in, and shall not permit the filing of a lien against any part of the Leased Premises.
9. **Damages and Improvements.**
 - a. Lessee shall give Lessor, or its agents, prompt written notice of any accident to or defects in the water pipes, gas pipes, electric light and fixtures or heating apparatus. Lessor shall at all reasonable times have the right to enter, or to authorize another enter the Leased Premises for the purposes of making

such repairs or alterations therein as shall be necessary and proper for the safety, protection, preservation or improvement of said Premises or any part thereof or the building containing the same. Lessee shall not make alterations in or additions to said Premises without first obtaining Lessor's written consent. Alterations, additions, fixtures and improvements, whether temporary or permanent in character made in or upon said Premises shall become Lessor's property and shall remain upon said Premises at the termination of this Lease without any compensation to Lessee.

- b. If, during the term of this Lease, the building or Premises shall be destroyed, in whole or part, by fire, the elements or by other means, not the result of the actions of Lessee or its officials, clients, customers, assigns, employees or agents rendering the Premises wholly or partially unfit for occupancy, and damaged to the point of not being reparable with reasonable diligence within sixty (60) days from the happening of such damage, then Lessor may elect that this Lease may be terminated from the date of such damage or destruction. Lessee shall immediately surrender the Premises and all interests therein to Lessor and Lessee shall pay rent within this term only to the time of such damage or destruction or partial destruction. If the damage is the result of the actions of Lessee or its officials, clients, customers, assigns, employees or agents, then Lessee shall be responsible to pay the balance due under the Lease remaining or the equivalent of twelve months lease payments, whichever is greater, as well as pay for the cost of repair of the damages resulting therefrom. If the Premises shall be repairable, within sixty (60) days of the occurring of the damage, then the rent shall not run or accrue after the damage or while the process of repair is going on, unless the damage is the result of the actions of Lessee or its officials, clients, customers, assigns, employees or agents, then rent payments shall continue. Lessor shall repair the same with all reasonable diligence and rent shall recommence upon occupation and use of Premises by Lessee.

10. Responsibilities. Parties do explicitly accept that following responsibilities as they pertain to the operation/maintenance of the Premises;

a. Lessor shall be responsible for:

1. All capital improvements or repairs to the premises, including but not limited to carpeting, roofing, external painting or siding (in entirety), and driveways;
2. All necessary repairs to heating, cooling and ventilation units, plumbing repairs, and electrical repairs which are necessary to maintain the Premises in a habitable condition;
3. Replacement of external building lamps;
4. Any damage which is caused by forces of nature, and immediately impacts the habitability or usability of the Premises;
5. All repairs necessary to any appliance which is owned by the Lessor, and replacement of said item in the event it is unusable;
6. Notwithstanding the above, the Lessor shall not be liable for any repairs which are caused by the Lessee, their clients, officials, assigns, employees, invitees and agents of the Lessee causing damage intentional or unintentional to the Premises.

b. Lessee shall be responsible for:

1. All repairs and replacement to any portion of the Premises damaged by the Lessee, their clients, officials, assigns, employees, invitees and agents of the Lessee causing the damage intentional or unintentional to the Premises;
2. Any routine and anticipated maintenance of any appliance or equipment which is necessary due to normal use of the item;
3. Any services or duties necessary to maintain the landscape and esthetic value of the yard. Such duties include but are not limited to general painting (maintenance/upkeep), litter

removal, trimming of trees, lawn cutting, snow shoveling and/or removal. Twenty-four (24) hour access to the facility is required. Assigned parking lots and sidewalks to be cleaned by 7:00 a.m. Monday through Friday.

4. Agrees to provide all utilities, including heat, water, electricity, etc.
 5. Lessee shall provide for custodial services within leased areas, and shall be responsible for interior cleaning and routine maintenance. For purposes of this section, routine maintenance includes, but is not limited to, interior painting, cleaning, minor flooring repairs, replacement of light bulbs, smoke detector maintenance, minor repairs to doorways, doors, and cabinetry;
- c. In the event that disputes exist between the Parties to any of the above, the Parties agree that prior to any action being filed; the Parties shall mutually attempt resolution between the parties.

11. Maintenance. Maintenance repairs are to be completed promptly with or without written notice. If Lessor does not fulfill the obligations set forth hereunder in a timely manner Lessee shall give notice of such conditions. Upon notice to Lessor; Lessor shall have fourteen (14) days to respond and correct said conditions. Lessee shall have the right at any time thereafter without notice to solicit the repair. The Lessor shall have the right to mitigate with the Lessee any charges hereunder that they feel are excessive, unreasonable, and not within the necessity of correction. The Lessor shall reserve the right to itemize any bill received to make payment on such services or items which directly impact the usability of the Premises.

12. Loss covered by Insurance.

- a. Lessor and Lessee hereby mutually waive and release any cause of action or right of recovery either may have hereafter for any loss of use or damage to the Leased premises or to the personal property of either caused by fire, explosion or other risk of loss covered by insurance. Lessor and Lessee shall each maintain policies of insurance in an amount adequate to insure its interest in real and personal property, including loss of use.
- b. At all times during the term of this Lease, Lessee shall keep in force and effect all insurance policies, including but not limited to comprehensive general liability insurance, worker's compensation and property insurance to cover the Premises. Lessee shall obtain said insurance from a company licensed and authorized to do business in the State of Wisconsin. At a minimum the Lessee shall have \$1,000,000 general liability insurance and \$500,000 Property Insurance. Lessee shall provide to Lessor a Certificate of Insurance with two endorsements, one naming the Lessor and its officials, employees, representatives and agents as additional insured, and one endorsement which gives the Lessor thirty (30) days prior written notice of cancellation, modification or non-renewal of the insurance.

13. Indemnification. Lessee shall indemnify, hold harmless and defend Lessor, its officials, officers, agents, assigns and employees from and against any and all liability, claim, damage, demands, lawsuits, loss, cost, expense, including reasonable attorney's fees, and all liability in connection with claims for damages as a result of injury or death of any person, or property damage sustained by any person which arise from or in any manner grow out of any act, omission or negligence by Lessee, its employees, contractors or subcontractors, clients, officials, agents, employees and invitees.

Lessor does not waive and specifically reserves its rights to assert any and all affirmative defenses and limitations of liability as specifically set forth in Wisconsin Statutes §893 and related Statutes.

14. Default.

- a. A material default or material breach (whether material default or material breach, hereinafter referred to as a "default") under this Lease shall be defined as the failure of the Parties to perform

any term, covenant, condition, warranty or promise under this Lease required to be performed by the Parties. In the event of any default of this Lease, or any of its terms or conditions by any Party hereto, such Party shall, upon written notice from the non-defaulting Party, proceed immediately to cure or remedy such default, and in any event shall cure any such default within thirty (30) calendar days of receipt of said written notice of default. In the event of a default, the non-defaulting Party shall have the option of terminating the Lease upon written notice to the defaulting Party.

b. A delinquent Rent payment shall be deemed a default under this Lease.

- 15. Notice.** A notice, demand or other communication hereunder shall be deemed to have been sufficiently given by any party to another party under this Lease Agreement when personally delivered, or mailed by first class registered or certified mail, postage prepaid, with return receipt, or by recognized delivery service with proof of delivery and addressed as follows:

For the Lessor:

MOLLY HILLMANN
Contracts and
Provider Relations Manager
Brown County Human Services
P.O. Box 22188
Green Bay, WI 54305-2188
(920) 448-6237

For Lessee:

JEFF VANDELEEST
Executive Director
Family Services of Brown County
Northeastern Wisconsin, Inc.
P.O. Box 22308
Green Bay, WI 54305
(920) 436-6800

All other correspondence may be sent by U.S. Mail and addressed as noted above. The above addresses and contact information may be changed at any time by the parties desiring to make changes by notice given to the other party in the manner provided above.

- 16. Severability.** The provisions of this Lease are severable and if any provision is found to be invalid, unenforceable, or void by a court of competent jurisdiction, the remainder of the Lease shall remain in full force and effect and shall not be affected, impaired or invalidated unless the effect of holding the provision invalid, unenforceable or void defeats the entire purpose of the Lease.
- 17. Governing Law.** This Lease shall be deemed to have been made in Brown County, Wisconsin and shall be governed by, construed under and enforced in accordance with the law of the State of Wisconsin. All actions or proceedings relating directly or indirectly, to this Agreement whether sounding in contract or tort shall be litigated in the Courts of Brown County, Wisconsin. All Parties to this Agreement hereby subject themselves to the jurisdiction of the Courts of Brown County, Wisconsin.
- 18. Assignment.** The rights and obligations of the Parties under this Agreement are personal as between them, and they may not be assigned, transferred or conveyed in any manner by either Party without the prior written consent of the other Party.
- 19. Waiver.** Waiver by either Party of a breach or a violation of any provision or term of this Agreement may not be construed to be a waiver of any subsequent breach.

20. **Headings.** The section titles have been inserted in this Lease primarily for convenience, and do not define, limit or construe the contents of such paragraphs. If headings conflict with the text, the text shall control.
21. **Integration.** Each Party acknowledges that no other party, nor any agent of any Party, has made promise, representation, or warranty whatsoever, expressed or implied, not contained herein, concerning the subject matter hereof, to induce the other Party to execute this Agreement; and each Party acknowledges that it has not executed this Agreement in reliance on any such promise, representation, or warranty not contained herein.
22. **Entire Agreement/Amendments.** This Lease supersedes all agreements previously made between the Parties relating to its subject matter. There are no other understandings or agreements between them with regard to this Lease. This Agreement is the entire agreement between the undersigned Parties and shall only be modified, changed or amended in writing and signed by duly authorized representatives of each Party, which amendment expressly states that it is the intention of the Parties to amend this Agreement.
23. **Third Party Beneficiary.** Nothing in this Agreement nor any act of the undersigned Parties shall be deemed or construed to create any relationship of third party beneficiary, of principal or agent, of limited or general partners, of joint venture, or of any association whatsoever between the Parties hereto.
24. **Construction.** All Parties have contributed to the drafting of this Lease. In the event of a controversy, dispute or contest over the meaning, interpretation, validity or enforcement of this document or any of its terms or conditions, there shall be no inferences, presumption or conclusion drawn whatsoever against any Party by virtue of that Party having drafted the document or any portion thereof.
25. **Signature Authority.** The persons signing this Lease warrant that they have been authorized to enter into this Lease by and on behalf of their respective Parties and that they have full and complete authority to bind their respective Parties by executing this Lease.

IN WITNESS WHEREOF, Lessor has caused this lease to be signed by its duly authorized officers, and Lessee has hereunto set hand and seal.

Dated: this _____ day of _____, 20____

By:

JEFF VANDELEEST
Family Services of NEW, Inc.

SANDY JUNO
County Clerk
Brown County

ERIK PRITZL
Executive Director,
Brown County Human Services

TROY STRECKENBACH
County Executive
Brown County

BROWN COUNTY HUMAN SERVICES

111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-3600



Phone (920) 448-6000 Fax (920) 448-6166

Erik Pritzl, Executive Director

To: Human Services Board, Human Services Committee

Date: November 2, 2015

Subject: September 2015 financial results for Community Programs and Community Treatment Center

As of 9/30/15 Community Programs YTD revenues are \$64,382,078 or 82% of the annual budgeted amount. This is slightly favorable compared to YTD expenses of \$65,524,326 or 81% of the annual budget. The YTD deficit is \$1,142, 249. The total 2015 Amended Budget reflects an anticipated deficit of \$1,907,986 including Family Care maintenance of effort payments to the State which are due for July through December. The total for these Family Care payments will be \$1,942,565 with \$809,545 incurred through 9/30/15. This leaves \$1,133,021 due for the final 3 months of the year, which is higher because all Family Care cases are now transferred from County to MCO administration following the 7/1/15 to 10/1/15 transition period. Because of the later transition to Family Care which was originally anticipated to begin 3/1/15, YTD percentage used statistics for both revenues and expenses are elevated compared to 75% normally expected when reporting results for 9 of 12 months.

Financial results for the Community Treatment Center are unfavorable as of 9/30/15 with revenues of \$7,706,564 or 60% of the total 2015 budget and expenses of \$10,043,660 or 73% of the annual budget for a total deficit of \$2,337,096 which is an average of \$259,677 per month. Monthly results for September showed a deficit of \$85,796 which is approaching the budgeted level of \$66,358 per month (\$796,300 annually) originally anticipated. Increased census during September in all areas of CTC operations contributed favorably to revenues for the month.

	<u>September Census</u>	<u>YTD Census</u>	<u>Budgeted Census</u>
Nursing Home	62.1	61.1	62.0
Hospital	11.3	10.1	11.0
CBRF	3.2	1.2	6.0

Respectfully Submitted,

Eric Johnson
Finance Manager



Community Programs

Through 09/30/15
Prior Fiscal Year Activity Included
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund 201 - CP									
REVENUE									
Property taxes	15,060,752.00	.00	15,060,752.00	1,255,062.67	.00	11,295,564.03	3,765,187.97	75	11,435,041.53
Intergov Revenue	43,793,652.00	18,127,755.00	61,921,407.00	1,723,057.66	.00	51,554,797.64	10,366,609.36	83	59,617,258.58
Public Charges	1,960,068.00	.00	1,960,068.00	148,931.12	.00	1,440,673.50	519,394.50	74	1,480,981.77
Miscellaneous Revenue	19,400.00	.00	19,400.00	1,845.45	.00	68,020.65	(48,620.65)	351	13,477.12
Other Financing Sources	30,700.00	.00	30,700.00	2,558.00	.00	23,022.00	7,678.00	75	43,475.04
REVENUE TOTALS	\$60,864,572.00	\$18,127,755.00	\$78,992,327.00	\$3,131,454.90	\$0.00	\$64,382,077.82	\$14,610,249.18	82%	\$72,590,234.04
EXPENSE									
Personnel Costs	18,252,054.00	1,023,624.00	19,275,678.00	1,392,199.25	.00	14,659,750.31	4,615,927.69	76	14,967,408.10
Operating Expenses	44,450,998.00	17,096,130.00	61,547,128.00	2,806,300.90	24,079.30	50,851,548.26	10,671,500.44	83	57,588,415.66
Outlay	69,507.00	8,000.00	77,507.00	.00	35,421.00	13,027.90	29,058.10	63	(425.00)
EXPENSE TOTALS	\$62,772,559.00	\$18,127,754.00	\$80,900,313.00	\$4,198,500.15	\$59,500.30	\$65,524,326.47	\$15,316,486.23	81%	\$72,555,398.76
Fund 201 - CP Totals									
REVENUE TOTALS	60,864,572.00	18,127,755.00	78,992,327.00	3,131,454.90	.00	64,382,077.82	14,610,249.18	82	72,590,234.04
EXPENSE TOTALS	62,772,559.00	18,127,754.00	80,900,313.00	4,198,500.15	59,500.30	65,524,326.47	15,316,486.23	81	72,555,398.76
Fund 201 - CP Totals	(\$1,907,987.00)	\$1.00	(\$1,907,986.00)	(\$1,067,045.25)	(\$59,500.30)	(\$1,142,248.65)	(\$706,237.05)		\$34,835.28
Grand Totals									
REVENUE TOTALS	60,864,572.00	18,127,755.00	78,992,327.00	3,131,454.90	.00	64,382,077.82	14,610,249.18	82	72,590,234.04
EXPENSE TOTALS	62,772,559.00	18,127,754.00	80,900,313.00	4,198,500.15	59,500.30	65,524,326.47	15,316,486.23	81	72,555,398.76
Grand Totals	(\$1,907,987.00)	\$1.00	(\$1,907,986.00)	(\$1,067,045.25)	(\$59,500.30)	(\$1,142,248.65)	(\$706,237.05)		\$34,835.28



CTC Operating Results

Through 09/30/15

Prior Fiscal Year Activity Included

Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
Fund 630 - CTC									
REVENUE									
Property taxes	2,578,283.00	.00	2,578,283.00	214,856.92	.00	1,933,712.28	644,570.72	75	1,947,950.28
Intergov Revenue	3,893,727.00	.00	3,893,727.00	367,435.53	.00	2,662,596.16	1,231,130.84	68	2,797,151.50
Public Charges	4,914,426.00	.00	4,914,426.00	170,702.57	.00	2,011,593.00	2,902,833.00	41	3,135,789.99
Miscellaneous Revenue	1,534,626.00	.00	1,534,626.00	219,508.83	.00	1,091,863.10	442,762.90	71	1,253,843.64
Other Financing Sources	.00	6,799.00	6,799.00	.00	.00	6,799.00	.00	100	10,186.00
REVENUE TOTALS	\$12,921,062.00	\$6,799.00	\$12,927,861.00	\$972,503.85	\$0.00	\$7,706,563.54	\$5,221,297.46	60%	\$9,144,921.41
EXPENSE									
Personnel Costs	9,427,173.00	6,799.00	9,433,972.00	717,722.45	.00	6,826,269.06	2,607,702.94	72	7,189,036.27
Operating Expenses	4,290,189.00	.00	4,290,189.00	340,577.83	.00	3,216,757.24	1,073,431.76	75	3,298,411.12
Outlay	.00	.00	.00	.00	.00	633.67	(633.67)	+++	.00
EXPENSE TOTALS	\$13,717,362.00	\$6,799.00	\$13,724,161.00	\$1,058,300.28	\$0.00	\$10,043,659.97	\$3,680,501.03	73%	\$10,487,447.39
Fund 630 - CTC Totals									
REVENUE TOTALS	12,921,062.00	6,799.00	12,927,861.00	972,503.85	.00	7,706,563.54	5,221,297.46	60	9,144,921.41
EXPENSE TOTALS	13,717,362.00	6,799.00	13,724,161.00	1,058,300.28	.00	10,043,659.97	3,680,501.03	73	10,487,447.39
Fund 630 - CTC Totals	(\$796,300.00)	\$0.00	(\$796,300.00)	(\$85,796.43)	\$0.00	(\$2,337,096.43)	\$1,540,796.43		(\$1,342,525.98)
Grand Totals									
REVENUE TOTALS	12,921,062.00	6,799.00	12,927,861.00	972,503.85	.00	7,706,563.54	5,221,297.46	60	9,144,921.41
EXPENSE TOTALS	13,717,362.00	6,799.00	13,724,161.00	1,058,300.28	.00	10,043,659.97	3,680,501.03	73	10,487,447.39
Grand Totals	(\$796,300.00)	\$0.00	(\$796,300.00)	(\$85,796.43)	\$0.00	(\$2,337,096.43)	\$1,540,796.43		(\$1,342,525.98)

CTC DOUBLE SHIFTS WORKED 10/13 THRU 11/10/15/2015

Date	Employee Name	Classification	shifts worked	Reason
10/14/2015	Susan Seidl	LPN	PM/NOC	covered NOC call in
10/20/2015	Amanda Devroy	RN	AM/PM	open PM shift
10/24/2015	Rachel Sidlauskas	RN	AM/PM	open PM shift
10/25/2015	Stephanie Crooks	CNA	AM/PM	covered AM call in
10/31/2015	Lennifer Lepak	LPN	AM/PM	LPN shortage
10/31/2015	Lyman Jacobs	CNA	PM/NOC	open NOC shift
11/3/2015	Cris Koski	LPN	PM/NOC	LPN shortage
10/7 & 8/2015	Brenda Spencer	LPN	AM/PM	LPN shortage

**BROWN COUNTY COMMUNITY TREATMENT CENTER
OCTOBER 2015 BAY HAVEN STATISTICS**

ADMISSIONS	October	Year to Date 2015	Year to Date 2014
Voluntary - Mental Illness	15	115	384
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	0
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	0
Emergency Detention - Mental Illness	0	0	1
Court Order Prelim. - Mental Illness	0	0	0
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	0	0	0
Commitment - Mental Illness	0	0	0
Return from Conditional Release	0	0	0
Court Order Prelim. - Drug	0	0	0
Other	0	0	0
TOTAL	15	115	385

ADMISSIONS BY UNITS	October	Year to Date 2015	Year to Date 2014
Bay Haven	15	115	385
TOTAL	15	115	385

ADMISSIONS BY COUNTY	October	Year to Date 2015	Year to Date 2014
Brown	9	88	319
Door	0	4	9
Kewaunee	1	5	4
Oconto	2	4	9
Marinette	0	0	3
Shawano	1	9	9
Waupaca	0	0	0
Menominee	0	1	0
Outagamie	0	1	4
Manitowoc	1	2	21
Winnebago	0	0	0
Other	1	1	7
TOTAL	15	115	385

NEW ADMISSIONS	October	Year to Date 2015	Year to Date 2014
Bay Haven	13	83	257
TOTAL	13	83	257

READMIT WITHIN 30 DAYS	October	Year to Date 2015	Year to Date 2014
Bay Haven	0	7	32
TOTAL	0	7	32

AVERAGE DAILY CENSUS	October	Year to Date 2015	Year to Date 2014
Bay Haven	3	1	5
TOTAL	3	1	5

INPATIENT SERVICE DAYS	October	Year to Date 2015	Year to Date 2014
Bay Haven	92	433	1624
TOTAL	92	433	1624

BED OCCUPANCY	October	Year to Date 2015	Year to Date 2014
Bay Haven	20%	9%	36%
TOTAL	20%	9%	36%

DISCHARGES	October	Year to Date 2015	Year to Date 2014
Bay Haven	19	113	383
TOTAL	19	113	383

DISCHARGE DAYS	October	Year to Date 2015	Year to Date 2014
Bay Haven	117	415	1668
TOTAL	117	415	1668

AVERAGE LENGTH OF STAY	October	Year to Date 2015	Year to Date 2014
Bay Haven	6	4	4
TOTAL	6	4	4

AVERAGE LENGTH OF STAY BY COUNTY	October	Year to Date 2015	Year to Date 2014
Brown	6	5	4
Door	0	1	4
Kewaunee	4	2	8
Oconto	5	3	3
Marinette	0	0	4
Shawano	3	2	8
Waupaca	0	0	0
Menominee	0	0	0
Outagamie	0	0	2
Manitowoc	2	1	4
Winnebago	0	0	0
Other	16	8	4
TOTAL	6	5	4

IN/OUTS	Current	YTD	2014
	1	1	0

**BROWN COUNTY COMMUNITY TREATMENT CENTER
OCTOBER 2015 NICOLET PSYCHIATRIC CENTER STATISTICS**

ADMISSIONS	October	Year to Date 2015	Year to Date 2014
Voluntary - Mental Illness	11	122	89
Voluntary - Alcohol	0	0	0
Voluntary - AODA/Drug	0	0	0
Police Protective Custody - Alcohol	0	0	0
Commitment - Alcohol	0	0	0
Commitment - Drug	0	0	0
Court-Ordered Evaluation	0	0	0
Emergency Commitment- Alcohol	0	0	0
Emergency Detention - Drug	0	0	0
Emergency Detention - Mental Illness	79	603	633
Court Order Prelim. - Mental Illness	2	2	5
Court Order Prelim. - Alcohol	0	0	0
Court Order for Final Hearing	1	9	7
Commitment - Mental Illness	0	0	0
Return from Conditional Release	1	60	75
Court Order Prelim. - Drug	0	0	0
Other	0	4	0
TOTAL	94	800	809

ADMISSIONS BY UNITS			
Nicolet	94	800	809
TOTAL	94	800	809

ADMISSIONS BY COUNTY			
Brown	68	559	506
Door	3	16	27
Kewaunee	1	18	20
Oconto	3	32	51
Marinette	2	27	28
Shawano	1	28	28
Waupaca	0	1	7
Menominee	2	6	6
Outagamie	0	10	13
Manitowoc	11	64	85
Winnebago	0	4	4
Other	3	35	34
TOTAL	94	800	809

NEW ADMISSIONS			
Nicolet	51	385	400
TOTAL	51	385	400

READMIT WITHIN 30 DAYS			
Nicolet	10	100	74
TOTAL	10	100	74

AVERAGE DAILY CENSUS	October	Year to Date 2015	Year to Date 2014
Nicolet	10	10	11
TOTAL	10	10	11

INPATIENT SERVICE DAYS			
Nicolet	298	3049	3302
TOTAL	298	3049	3302

BED OCCUPANCY			
Nicolet (16 Beds)	60%	63%	68%
TOTAL (16 Beds)	60%	63%	68%

DISCHARGES			
Nicolet	92	803	811
TOTAL	92	803	811

DISCHARGE DAYS			
Nicolet	290	3031	3355
TOTAL	290	3031	3355

AVERAGE LENGTH OF STAY			
Nicolet	3	4	4
TOTAL	3	4	4

AVERAGE LENGTH OF STAY BY COUNTY			
Brown	3	4	4
Door	2	2	5
Kewaunee	1	2	4
Oconto	2	2	3
Marinette	7	6	4
Shawano	4	4	4
Waupaca	0	0	5
Menominee	6	4	32
Outagamie	0	1	4
Manitowoc	4	5	5
Winnebago	13	7	2
Other	2	3	5
TOTAL	3	4	4

IN/OUTS	Current	YTD	2014
	9	55	28

5b

BELLIN PSYCHIATRIC CENTER
INVOLUNTARY AND VOLUNTARY ADOLESCENT ADMISSIONS
Month Ending: October 2015

Voluntary Admissions	22
Involuntary Admissions	13
Voluntary Inpatient Days	97.7
Involuntary Inpatient Days	55.3
Voluntary Avg Length of Stay	4.4
Involuntary Avg Length of Stay	4.25

Report of Child Abuse/Neglect by Month

Month	2014	2015	% Change from 2014 to 2015
January	403	415	2.98%
February	433	403	-6.9%
March	427	444	3.98%
April	485	453	-7.06%
May	474	407	-14.14%
June	351	319	-9.12%
July	308	319	3.571%
August	301	272	-9.63%
September	437	430	-1.6%
October	438	436	-2.0%
November	413		
December	394		
Total	4864		

Reports Investigated by Month

Month	2014	2015	% Increase
January	152	135	-11.18%
February	140	120	-14.29%
March	157	139	-11.46%
April	166	124	-33.87%
May	157	120	-23.57%
June	129	117	-9.30%
July	136	102	-25.0%
August	108	91	-15.74%
September	154	134	-12.99%
October	138	132	-6.0%
November	113		
December	119		
Total	1669		

HUMAN SERVICES
2015 CONTRACT STATUS LOG - 11/11/2015

Agency	Type	Contract Sent	Contract Returned	Original Contract Amount	Updated Contract Amount
ADAMS AFH	AFH	12/11/14	1/6/15	\$111,218	\$111,218
ADAMS, R AFH	AFH	12/11/14	12/22/14	\$27,049	\$27,049
ADRC	Other	11/20/14	12/1/14	\$72,000	\$72,000
ADULT CARE LIVING OF NE WI	CBRF	11/20/14	12/8/14	\$205,640	\$205,640
ADVOCATES FOR HEALTHY TRANSITIONAL LIVING LLC	Foster Care	12/15/14	1/6/15	\$15,000	\$15,000
ADVOCATES, EXTENSION LLC	Children	1/8/15	1/15/15	\$120,000	\$120,000
AGE WELL CENTRE FOR LIFE ENRICHMENT	RCAC	1/26/15	1/29/15	\$240,000	\$240,000
AGNESIAN HEALTHCARE INC	Autism	12/11/14	2/2/15	\$22,100	\$22,100
ALL ABOUT KIDS, INC.	Children	12/15/14	1/12/15	\$130,800	\$130,800
AMERICAN FOUNDATION OF COUNSELING	Children	4/14/15	4/20/15	\$100,000	\$100,000
ANDERSON CAMPBELL EDUCATIONAL TEACHING & CONSULTING	Children	11/3/15		\$24,000	\$24,000
ANGELS ON ARCADIAN	CBRF	11/20/14	12/1/14	\$1,531,200	\$2,347,125
ANGELS TOUCH ASSISTED LIVING	CBRF	11/20/14	1/6/15	\$175,000	\$175,000
ANNA'S HEALTHCARE (COUNTRY LIVING)	CBRF	11/20/14	12/18/14	\$445,641	\$445,641
ANU FAMILY SERVICES, INC. (FORMERLY PATH)	Foster Care	12/15/14	1/12/15	\$180,000	\$180,000
ARTISAN ASSISTED LIVING	CBRF	11/20/14	12/22/14	\$480,566	\$480,566
ARTS AFH	AFH	11/20/14	11/24/14	\$30,132	\$30,132
ASPIRO INC	Other	1/8/15	1/19/15	\$3,396,518	\$3,396,518
BELLIN HEALTH OCCUPATIONAL HEALTH SOLUTIONS	Other	2/9/15	4/27/15	\$40,000	\$40,000
BELLIN PSYCHIATRIC CENTER	Other	3/16/15	3/26/15	\$10,000	\$10,000
BENNIN, MARILYN	Children	12/15/14	1/26/15	\$9,000	\$9,000
BETHESDA	CBRF	12/11/14	1/6/15	\$14,300	\$14,300
BETTER DAYS MENTORING LLC		8/27/15		\$15,000	\$15,000
BIRCH CREEK	CBRF	11/20/14	1/8/15	\$1,235,182	\$1,235,182
BISHOPS COURT	CBRF	11/20/14	1/8/15	\$1,304,662	\$1,304,662
BOLL ADULT CARE CONCEPTS	AFH	12/22/14	1/6/15	\$825,000	\$825,000
BORNEMANN CBRF	CBRF	12/11/14	1/6/15	\$282,919	\$282,919
BOURASSA AFH	AFH	11/20/14	12/9/14	\$18,720	\$18,720
BROTOLOC HEALTH CARE SYSTEMS	CBRF	12/12/14	1/6/15	\$982,600	\$982,600
BRUNETTE AFH	AFH	11/20/14	12/1/14	\$52,152	\$52,152
BRUSS SUPPORTIVE COMMUNITY LIVING	AFH	11/20/14	12/4/14	\$273,214	\$273,214
BUSSE AFH	AFH	11/20/14	12/1/14	\$66,444	\$66,444
CAPELLE AFH	AFH	1/26/15	2/2/15	\$63,572	\$63,572
CARE FOR ALL AGES (CFAA)	CBRF	12/18/14	1/8/15	\$156,000	\$156,000
CARRINGTON MANOR ASSISTED LIVING	CBRF	11/20/14	11/25/14	\$92,628	\$92,628
CATHOLIC CHARITIES	Other	12/15/14	12/22/14	\$173,406	\$173,406
CENTERPIECE LLC	Autism	12/11/14	12/18/14	\$150,000	\$150,000
CENTURY RIDGE OF GREEN BAY, INC.	CBRF	11/20/14	12/1/14	\$387,932	\$387,932
CEREBRAL PALSY INC.	Other	1/8/15	1/15/15	\$1,510,200	\$1,510,200
CEREBRAL PALSY OF MIDEAST WI INC	Other	11/20/14	12/9/14	\$4,800	\$4,800
CHILDRENS SERVICE SOCIETY	Foster Care	12/15/14	1/15/15	\$25,000	\$25,000
CHRISTENSEN AFH	AFH	11/20/14	12/1/14	\$74,357	\$74,357
CLARITY CARE INC	CBRF	11/20/14	12/18/14	\$1,838,347	\$1,894,734
COGNITIVE CONCEPTS	AFH	11/20/14	1/13/15	\$278,977	\$372,606
COMFORT KEEPERS	Home Health	3/16/15	4/6/15	\$600,000	\$600,000
COMPASS DEVELOPMENT	AFH	11/20/14	1/15/15	\$1,198,927	\$1,198,927
COMPASS DEVELOPMENT SHC INC	Home Health	11/20/14	1/15/15	\$500,000	\$500,000
CONLEY AFH	AFH	11/20/14	11/24/14	\$36,645	\$36,645
CONNECTIONS LLC	Autism	12/15/14	12/22/14	\$25,000	\$25,000
CURO CARE LLC	AFH	12/11/14	1/6/15	\$503,440	\$503,440
DARNELL RECEIVING HOME	Receiving Home	12/15/14	2/2/15	\$13,140	\$15,878
DEATHERAGE-VELEKE AFH	AFH	11/20/14	12/1/14	\$20,759	\$20,759
DEBAERE AFH	AFH	11/20/14	12/11/14	\$69,240	\$69,240
DEER PATH ASSISTED LIVING INC	CBRF	12/11/14	1/8/15	\$182,500	\$188,815
DENMARK SENIOR LIVING	CBRF	7/15/15	7/20/15	\$7,500	\$7,500
DODGE COUNTY (DBA CLEARVIEW)	CBRF	3/2/15	3/16/15	\$285,795	\$285,795
DORN AFH	AFH	11/20/14	12/2/14	\$22,008	\$22,008
DUNGARVIN WISCONSIN LLC	Other	11/20/14	12/4/14	\$686,931	\$686,931
DYNAMIC FAMILY SOLUTIONS	Children	12/15/14	1/6/15	\$59,400	\$139,400
EAST SHORE INDUSTRIES	Other	11/20/14	12/1/14	\$46,594	\$46,594
ELSNER AFH	AFH	11/20/14	1/26/15	\$14,348	\$14,348

HUMAN SERVICES
2015 CONTRACT STATUS LOG - 11/11/2015

Agency	Type	Contract Sent	Contract Returned	Original Contract Amount	Updated Contract Amount
EMERALD SHORES	CBRF	3/17/15	4/9/15	\$35,000	\$57,000
ENCOMPASS CHILD CARE	Children	12/15/14	1/6/15	\$15,000	\$15,000
ENGBERG AFH	AFH	11/20/14	12/1/14	\$39,216	\$39,216
FAMILY SERVICE OF NORTHEAST WI, INC.	Children	12/15/14	1/6/15	\$2,173,415	\$2,303,415
FAMILY TRAINING PROGRAM	Children	12/15/14	2/2/15	\$155,000	\$155,000
FENLON AFH	AFH	11/20/14	12/1/14	\$48,137	\$48,137
G & I OCHS INC.	CBRF	11/20/14	12/1/14	\$1,936,174	\$1,936,174
GAUGER AFH	AFH	11/20/14	12/1/14	\$32,844	\$32,844
GOLDEN HOUSE	Other	12/18/14	1/6/15	\$63,086	\$63,086
GOLTZ J. AFH	AFH	11/20/14	12/8/14	\$24,360	\$24,360
GONZALEZ AFH	AFH	12/18/14	1/19/15	\$79,062	\$79,062
GOODWILL INDUSTRIES	Other	11/20/14	12/1/14	\$77,166	\$77,166
GREEN BAY TRANSIT COMMISSION	Transportation	---	---	\$400,000	\$400,000
GRONSETH AFH	AFH	11/20/14	11/25/14	\$44,736	\$44,736
HARMONY LIVING CENTERS LLC	CBRF	11/20/14	1/6/15	\$221,838	\$221,838
HAUGEN AFH	AFH	2/17/15	2/24/15	\$16,435	\$16,435
HEAD AFH	AFH	11/20/14	12/1/14	\$87,826	\$87,826
HELPING HANDS CAREGIVERS	Home Health	11/20/14	12/1/14	\$350,000	\$350,000
HIETPAS AFH	AFH	11/20/14	12/1/14	\$24,992	\$24,992
HOEFT AFH	AFH	11/24/14	12/2/14	\$29,713	\$29,713
HOME INSTEAD SENIOR CARE	Home Health	11/20/14	12/8/14	\$200,000	\$200,000
HOMES FOR INDEPENDENT LIVING	Other	11/20/14	12/8/14	\$6,252,622	\$6,612,755
IMPROVED LIVING SERVICES	AFH	12/22/14	1/6/15	\$943,100	\$943,100
INFINITY CARE INC	CBRF	11/20/14	12/1/14	\$380,128	\$380,128
INNOVATIVE COUNSELING	Autism	12/15/14	2/5/15	\$50,000	\$50,000
INNOVATIVE SERVICES	Other	2/9/15	2/23/15	\$13,430,200	\$13,430,200
INTERIM HEALTHCARE STAFFING	Home Health	11/20/14	2/9/15	\$25,000	\$25,000
J & DEE INC.	CBRF	11/20/14	12/1/14	\$1,821,000	\$1,821,000
JASMER AFH	AFH	12/11/14	1/6/15	\$13,608	\$13,608
KAKUK AFH	AFH	11/20/14	12/4/14	\$32,292	\$32,292
KCC FISCAL AGENT SERVICES	Other	1/8/15	1/15/15	\$4,200,000	\$4,200,000
KCC SERVICES INC	Other	11/20/14	11/25/14	\$2,000	\$2,000
KINDRED HEARTS	CBRF	11/20/14	12/8/14	\$890,100	\$890,100
KLARKOWSKI AFH	AFH	12/11/14	2/3/15	\$22,932	\$37,300
KLECZKA-VOGEL AFH	AFH	11/20/14	12/4/14	\$77,376	\$77,376
KLEIN, DR.	Autism	12/15/14	12/22/14	\$50,000	\$50,000
KPI INC (KATHI PAPA, INC)	Other	11/20/14	12/1/14	\$12,400	\$12,400
KRUEGER RECEIVING HOME	Receiving Home	12/15/14	1/6/15	\$13,140	\$13,140
KUSKE AFH	AFH	11/20/14	11/24/14	\$25,692	\$25,692
LAD LAKE	Children	12/22/14	1/6/15	\$40,000	\$40,000
LAKESWOOD ASSISTED LIVING	CBRF	11/20/14	12/22/14	\$64,000	\$64,000
LAMERS BUS LINES, INC.	Transportation	1/22/15	1/29/15	\$850,000	\$850,000
LANCASTER GARDENS	CBRF	1/27/15	2/2/15	\$37,000	\$37,000
LAURENT AFH	AFH	11/20/14	12/9/14	\$50,352	\$50,352
LAURENT, SALLY AFH	AFH	5/5/15	5/11/15	\$12,432	\$12,432
LEVY, LYNN AFH	AFH	8/3/15	8/19/15	\$12,138	\$12,138
LISKA, JOANN	Other	12/15/14	1/13/15	\$5,000	\$5,000
LUND VAN DYKE INC	Autism	12/18/14	1/6/15	\$210,000	\$210,000
LUTHERAN SOCIAL SERVICES	CBRF	12/22/14	1/15/15	\$900,000	\$900,000
MACHT VILLAGE PROGRAMS INC	Children	1/6/15	1/15/15	\$600,000	\$650,000
MARLA VISTA MANOR ASSISTED LIVING	CBRF	11/20/14	11/24/14	\$129,404	\$216,417
MARTIN AFH	AFH	11/20/14	12/8/14	\$19,509	\$19,509
MATTHEWS SENIOR LIVING	CBRF	11/20/14	1/22/15	\$202,380	\$202,380
MCCORMICK MEMORIAL HOME	CBRF	11/20/14	12/1/14	\$198,484	\$198,484
MEADOWLANDS	CBRF	11/20/14	12/1/14	\$39,871	\$39,871
MELOHN AFH	AFH	4/23/15	5/4/15	\$23,712	\$23,712
MILQUETTE AFH	AFH	11/20/14	12/4/14	\$22,344	\$22,344
MORAINES RIDGE LLC	RCAC	11/20/14	12/8/14	\$200,000	\$200,000
MYSTIC ACRES LLC	AFH	12/11/14	1/6/15	\$70,812	\$70,812
MYSTIC CREEK LLC	AFH	12/11/14	1/6/15	\$105,000	\$105,000
MYSTIC MEADOWS LLC	AFH	12/11/14	1/6/15	\$149,400	\$149,400

HUMAN SERVICES
2015 CONTRACT STATUS LOG - 11/11/2015

Agency	Type	Contract Sent	Contract Returned	Original Contract Amount	Updated Contract Amount
NEMETZ AFH	AFH	11/20/14	12/1/14	\$71,744	\$71,744
NEW COMMUNITY SHELTER INC	Other	12/15/14	1/6/15	\$40,000	\$40,000
NEW CURATIVE REHABILITATION	Other	2/5/15	2/12/15	\$1,124,415	\$1,124,415
NEW VIEW INDUSTRIES	Other	11/20/14	1/13/15	\$43,240	\$43,240
NEW VISIONS TREATMENT HOMES OF WI, INC	Foster Care	1/29/15	3/2/15	\$42,000	\$42,000
NORTHWEST PASSAGE	Children	12/15/14	2/9/15	\$67,500	\$67,500
ODD FELLOW REBEKAH HAVEN	CBRF	11/20/14	11/25/14	\$140,000	\$140,000
OPTIONS FOR INDEPENDENT LIVING INC	Other	7/27/15	8/3/15	\$10,000	\$10,000
OPTIONS LAB INC	Other	1/27/15	2/5/15	\$40,000	\$40,000
OPTIONS TREATMENT PROGRAM	Other	12/11/14	1/15/15	\$100,000	\$120,000
ORLICH AFH	AFH	11/20/14	12/15/14	\$95,854	\$95,854
OSTAPYUK AFH	AFH	11/20/14	1/6/15	\$56,058	\$56,058
PARAGON INDUSTRIES	Other	12/15/14	1/22/15	\$746,800	\$746,800
PARENT TEAM	Children	12/15/14	1/6/15	\$227,300	\$247,300
PARMENTIER AFH	AFH	11/20/14	12/1/14	\$91,465	\$91,465
PATIENT PINES	CBRF	11/20/14	11/24/14	\$284,000	\$284,000
PHOENIX BEHAVIORAL HEALTH SERVICES	Autism	12/11/14	12/18/14	\$25,000	\$25,000
PNUMA HEALTH CARE	CBRF	12/11/14	12/22/14	\$358,600	\$358,600
PRODUCTIVE LIVING SYSTEMS	CBRF	11/20/14	1/15/15	\$768,452	\$768,452
RAVENWOOD BEHAVIORAL HEALTH	CBRF	12/11/14	1/15/15	\$70,600	\$70,600
REHAB RESOURCES	Other	12/11/14	1/6/15	\$122,200	\$122,200
REM-WISCONSIN II, INC.	AFH	11/20/14	12/1/14	\$1,335,480	\$1,385,461
RENNES ASSISTED LIVING CORP	RCAC	11/20/14	12/1/14	\$75,000	\$75,000
RES-CARE WISCONSIN	Home Health	11/20/14	12/11/14	\$19,344	\$19,344
SALDANA AFH	AFH	12/8/14	1/19/15	\$43,360	\$43,360
SCHAUMBURG, LAURIE	Other	12/15/14	1/20/15	\$25,000	\$25,000
SCHULTZ AFH	AFH	11/20/14	1/13/15	\$107,772	\$107,772
SKORCZEWSKI AFH	AFH	11/20/14	1/6/15	\$18,660	\$18,660
SLAGHT AFH	AFH	11/20/14	12/8/14	\$55,246	\$55,246
SMET AFH	AFH	12/11/14	1/22/15	\$54,257	\$55,112
SOUTHERN HOME CARE SERVICES	Home Health	11/20/14	12/11/14	\$35,580	\$35,580
SPECTRUM BEHAVIORAL HEALTH	Other	3/30/15	4/30/15	\$50,000	\$50,000
ST. VINCENT HOSPITAL	Other	12/11/14	1/20/15	\$117,300	\$117,300
STARR/DINGER AFH	AFH	11/20/14	12/8/14	\$23,700	\$23,700
STEVENS AFH	AFH	11/20/14	1/6/15	\$30,905	\$30,905
STILLING AFH	AFH	12/11/14	12/22/14	\$32,802	\$37,758
STIRLING PCW SERVICES	Other	12/11/14	1/6/15	\$20,000	\$20,000
TALBOT AFH	AFH	12/15/14	1/6/15	\$23,838	\$23,838
TANZI AFH	AFH	11/20/14	12/1/14	\$85,330	\$85,330
TOMORROW'S CHILDREN INC	Children	1/20/15	1/29/15	\$100,000	\$100,000
TREMPEALEAU	CBRF	12/11/14	12/22/14	\$1,487,700	\$1,487,700
VALLEY PACKAGING INC.	Other	11/20/14	12/22/14	\$10,386	\$10,386
VANLANEN RECEIVING HOME	Receiving Home	12/15/14	1/20/15	\$19,710	\$19,710
VILLA HOPE	CBRF	12/15/14	1/12/15	\$1,730,700	\$2,032,009
WARREN, JOHN MD	Other	12/22/14	1/6/15	\$165,000	\$165,000
WAUSAUKEE ENTERPRISES	Other	11/20/14	12/4/14	\$18,586	\$18,586
WE ARE HOPE	Other	12/8/14	12/15/14	\$20,400	\$20,400
WILLOWCREEK AFH	AFH	11/20/14	12/4/14	\$445,136	\$445,136
WISCONSIN EARLY AUTISM PROJECT	Autism	12/15/14	12/22/14	\$300,000	\$300,000
WISCONSIN FAMILY TIES	Children	12/16/14	1/6/15	\$26,000	\$26,000
ZAMBON AFH	AFH	11/20/14	11/24/14	\$25,334	\$28,687
ZIESMER AFH	AFH	11/20/14	11/24/14	\$79,716	\$79,716
TOTAL				\$70,808,401	\$72,927,362

Brown County Human Services

TO: Human Services Committee Members

FROM: Lori Gauthier
Administrative Secretary

DATE: November 11, 2015

REQUEST FOR NEW NON-CONTINUOUS VENDOR			
VENDOR	SERVICES	DATE REQUESTED	DATE APPROVED
S & G Rentals	Housing	10/20/15	
Individual	Family Support	10/22/15	
Insight Counseling	Counseling	10/27/15	
Gundersen Clinic	Eye and Vision Clinic	10/27/15	
3M Electronic Monitoring	Electronic Monitoring	10/27/15	
St. Joseph Parish Athletic Club	Football fees	10/29/015	
Freedom House Ministries	Housing	10/29/15	
Children's Therapy Network	Occupational Therapy	10/29/15	
Individual	Family Support	11/9/15	
Individual	Respite	11/9/15	

Brown County Human Services

TO: Human Services Committee Members

FROM: Lori Gauthier
Administrative Secretary

DATE: November 11, 2015

REQUEST FOR NEW VENDOR CONTRACT				
VENDOR	SERVICES	CONTRACT AMOUNT	DATE REQUESTED	DATE APPROVED
ACE Teaching & Consulting	Daily Living Skills	\$24,000	11/2/2015	